

“SALUS POPULI SUPREMA LEX”



City of Portsmouth

HEALTH REPORT

For the Year 1936

BY

A. B. WILLIAMSON

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Medical Officer of Health

Medical Officer of Health to the Port of Portsmouth

Chief Administrative Medical Officer to the City Council

INCLUDING

The Report of the Public Analyst

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Health Committee

1935-36.

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ALDERMAN W. J. AVENS, J.P.

Chairman :

COUNCILLOR A. E. ALLAWAY.

Vice-Chairman :

COUNCILLOR L. N. BLAKE.

Aldermen :

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MRS. L. J. RAMSDEN.

F. W. WHITING, J.P.

J. P. D. LACEY, J.P.

A. G. STAPLEFORD.

J. J. MAHONEY.

H. T. CLIFTON.

J. ELLIS-JONES.

The following ladies were co-opted to serve on the Sub-Health
(Maternity and Child Welfare) Committee :

MRS. WESTGARTH.

MISS E. R. LAPTHORN.

MRS. TROWBRIDGE.

MRS. R. PARKER, J.P.

STAFF.

Medical Officer of Health :

A. B. WILLIAMSON, M.A., B.Sc., M.D., Ch.B., D.P.H.,
L.R.C.P., L.R.C.S., L.R.F.P.S.

Senior Assistant Medical Officers of Health :

T. ERNEST ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.)
IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

Chief Sanitary Inspector :

C. W. HALL, Cert. R. San. I., Hons. Medallist City and Guilds, Lond.,
R.P.C. Lond.

Chief Clerk to Health Services and Meteorological Observer :

L. C. ROGERS, Cert. S.I.B.

Meat, Food and Sanitary Inspector :

R. SCOULAR, M.R.C.V.S., Meat & Foods Cert. Inc. San. Assoc. of Scot.

Inspector of Workshops and Sanitary Inspector :

F. R. BELL, Cert. R. San. I.

**Inspector under the Food and Drugs (Adulteration) Act
and Sanitary Inspector :**

E. J. SINNETT, Cert. R. San. I.

Housing Inspectors :

E. B. SHAW, Cert. R. San. I., Hons. City and Guilds, Lond., R.P.C. Lond.
C. J. COOKSLEY, Cert. R. San. I., Hons. City and Guilds, Lond.

Inspectors of New Buildings and Sanitary Inspectors :

S. W. SMITH, Cert. R. San. I. W. J. SANDFORD, Cert. S.I.B.

Sanitary Inspectors :

F. H. MILLICAN, Cert. R. San. I. L. RICHARDS, Cert. R. San. I.
G. S. GATTRELL, Cert. R. San. I., Hons. City & Guilds Lond., R.P.C. Lond.
K. HOLMES, Cert. S.I.B. A. W. ARNOLD, Cert. S.I.B.
E. E. ROUGHTON, Cert. S.I.B., Hons. City & Guilds.
F. JOHNSON, Cert. S.I.B., Hons. Medallist, City & Guilds.
J. L. CORT, Cert. S.I.B., Hons. City & Guilds.
H. B. PARRY, Cert. S.I.B., Hons. City & Guilds.

First Assistant Clerk: E. S. CHADWICK.

Assistant Clerks :

Statistical:—H. WOODCOCK.

Hospitals.—A. A. SHERGOLD (from April) and L. PARKER (from April).

Infectious Diseases } G. COOPER (to March).
and Sanitary Inspection:— } E. ALLWOOD.

Maternity:—MISS H. WRIGHT and MISS H. DOREY (from April).

General :—F. NEWMAN (from March).

Health Visitors :

*MISS D. POULSON.

*MISS M. E. HANDLEY.

*MISS A. KNIGHT.

*†MRS. R. D. GRINDROD.

*MRS. M. SMEATON.

*†MISS E. K. WILTON.

*†MISS M. H. FLINT.

*†MISS W. G. SHERBORNE (to June)

*†MISS L. C. SESSIONS.

MISS R. SEALE (from August).

Port Sanitary Inspector : F. BATCHELOR.**Disinfector :** B. J. HILLS. **Messenger :** G. PITT.**Public Vaccinators (part-time) :**

P. HAYES, L.R.C.S., L.R.C.P., L.R.F.P. & S.

A. B. DOYLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M.

Vaccination Officer : L. T. McKINLAY.**Infant Life Protection Visitor :** *MRS. B. MADDEN.**MUNICIPAL TUBERCULOSIS DISPENSARY.****Clinical Tuberculosis Officer :**

IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

Nurses :

MISS L. LAMB.

MISS V. F. WARDLAW.

*MISS S. M. MITCHELL.

*MISS H. M. NEVILL.

Secretary : *MISS E. HEALEY.**Almoner :** *MISS N. O. ALLEN.**CHILD WELFARE CENTRES.****Senior Assistant Medical Officer of Health and Child Welfare Officer :**

T. E. ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.).

Maternity Officer and Inspector of Midwives :

RUBY N. FOGGIE, M.B., Ch.B.

Certified Midwife.†Health Visitors Cert. R.S.I.*

INFECTIOUS DISEASES HOSPITAL.

Medical Superintendent :

A. B. WILLIAMSON, M.A., M.D., B.Sc., D.P.H.

Deputy Medical Superintendent and Senior Assistant Medical Officer of Health :

IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

Senior Resident Medical Officer and Assistant Medical Officer of Health:

A. W. RUSSELL, M.D., Ch.B., D.P.H.

Junior Resident Medical Officer and Assistant Medical Officer of Health:

J. Q. MOUNTAIN, B.Sc., M.D., Ch.B., D.P.H.

Matron : MISS F. PETCHEY.

LANGSTONE SANATORIUM.

Medical Superintendent :

IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

Matron : MISS J. S. BROWN.

PUBLIC ANALYST : R. P. PAGE, F.I.C.

Chief Assistant : C. M. BECKETT.

Assistant : E. G. WHITTLE, B.Sc., A.I.C.

SAINT MARY'S HOSPITAL.

Medical Superintendent :

R. C. MACPHERSON, M.B., Ch.B. (Glas.)

Deputy Medical Superintendent :

R. A. ZEITLIN, M.R.C.S., L.R.C.P. (Lond.).

Senior Assistant Medical Officers :

V. S. HUGHES-DAVIES, B.Sc. (Wales), M.B., Ch.B. (Liverpool),
M.R.C.S. (Eng.), L.R.C.P. (London), D.C.H.

A. L. GILBEY, M.B., Ch.B. (Edin.), M.M.S.A.

Junior Assistant Medical Officers :

J. C. H. BROWNE, L.R.C.P., M.R.C.S. F. R. NEUBERT, L.M.S.S.A.

W. S. WOOLNER, B.Sc., M.D.C.M., L.M.C.C.

W. B. O'DRISCOLL, M.B., B.S., B.A.O.

Part-time Visiting Medical Officers :

Physician : R. J. LYTLE, M.D., B.S., B.A.O.

Surgeon : O. S. HILLMAN, F.R.C.S., L.R.C.P., M.B., M.S.

Ear, Nose and Throat Specialist :

E. COWPER TAMPLIN, F.R.C.S. (E.), L.R.C.P. (Lond.), D.L.O.

Radiologist : R. S. MacHARDY, M.B., Ch.B., D.R.

Orthopaedic Surgeon : A. G. ORD, F.R.C.S., L.R.C.P.

Skin Specialist : A. MURRAY STUART, F.R.C.S., L.R.C.P.

Consultant Obstetrician : T. BARNETT, M.D., F.R.C.S. (from April).

Dental Surgeon (part-time) : D. A. BEVIS, L.D.S., R.C.S. (Eng.)

Steward : B. NICHOLLS.

Assistant Steward : S. F. HIGGINS.

Clerks : A. SHERGOLD (to April), G. TIPPING (to April), W. RUMBOLD,
A. S. HUTCHINGS (from April), W. G. J. THOMAS (from April),
H. W. ALLEN (from April), H. S. SPACEY (from April),
Miss G. M. JUPE (from April).

VENEREAL DISEASES CLINIC.

Medical Officer (part-time) :

A. MURRAY STUART, F.R.C.S., L.R.C.P.

Pathologist (part-time) :

J. A. D. RADCLIFFE, M.B., B.Ch., B.A.O., R.U.I.

POLICE DEPARTMENT.

Police Surgeons (part-time) :

H. H. FISK, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

R. HAMER HODGES, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P. (Lond.).

**Medical Referee, Workmen's Compensation Act,
Medical Examiner for New Corporation Appointments, and
Medical Officer, Corporation Tramways.**

A. W. RUSSELL, M.D., Ch.B., D.P.H.

VETERINARY SURGEON (part-time) :

H. GREEN, M.R.C.V.S.

DISTRICT MEDICAL OFFICERS (part-time) :

A. E. CLARK, M.B., Ch.B. (Glas.).

C. H. BROWNE, L.R.C.P.I. & L.M., D.P.H.

J. C. DAVIS, M.B., Ch.B., B.A.O. (Dub.).

F. L. TITLEY, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

A. B. DOYLE, L.R.C.P., L.R.C.S. (I).

S. GUYER, M.B., Ch.B. (Glasgow).

SCHOOL MEDICAL SERVICE.

Chief Administrative Medical Officer :

A. B. WILLIAMSON, M.A., B.Sc., M.D., Ch.B., D.P.H., L.R.C.P.,
L.R.C.S., L.R.F.P.S.

School Medical Officer and Senior Assistant Medical Officer of Health :

T. ERNEST ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.)

Assistant Medical Officers :

ELIZABETH M. MARTIN, M.B., B.Ch. (Belfast), D.P.H.
JOHN M. MOUNSEY, B.A., M.B., B.Ch., B.A.O. (Dublin).
HARRY SMITH, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

Ophthalmic Surgeon (part-time) :

W. S. INMAN, M.B. (Lond.).

Senior Dental Surgeon :

L. J. THRELFALL, L.D.S., R.C.S. (Eng.).

Assistant Dental Surgeons :

MISS M. C. LAUDER, L.D.S., R.C.S. (Eng.).
E. G. W. LEWIS, L.D.S., R.C.S. (Eng.).
A. A. WOOD, L.D.S., R.C.S. (Eng.).

Dental Clerk-Attendants :

MRS. F. N. BESFORD.	MISS M. FERBRACHE.
MRS. E. M. PAY.	MISS I. G. SMITH.

Nurse in Charge :

*MISS B. LILLEY, Cert. San. Inst., Cert. Hygiene B.E.

School Nurses :

MISS A. M. DAWKINS, Cert. Med. Psych.	*MISS G. A. COOK.
MISS M. DURMAN.	*MISS O. G. HAWES.
*MISS M. McKENZIE.	MISS M. A. RICE.
*MISS K. PAGE, Cert. Med. Psych.	MISS E. V. SALMON, Cert. C.S., M.M.G.
†MRS. B. NEALE.*	*MISS A. M. KNAPP.
† <i>Temporary Appointment.</i>	* <i>Certified Midwife.</i>

Clerical Department :

R. W. HARVEY.	L. C. LEY.
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CITY MENTAL HOSPITAL.

Medical Superintendent :

THOMAS BEATON, O.B.E., M.D. (Lond.), B.S., F.R.C.P. (Lond).

Assistant Medical Officers :

A. F. GRIMBLY, M.A., M.D. (Dub.), B.Ch., B.A.O. (Dub.),
D.P.M., R.C.P.S.
G. G. BROWN, L.R.C.P.S. (Edin.), L.D.S., D.P.M.
G. A. BETTS, M.R.C.S., L.R.C.P. (Lond.)
J. P. McGUINNESS, L.R.C.P. & S. (Edin.), L.R.F.P.S.

Medical Officer's Report for 1936.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

Madam and Gentlemen,

I have the honour to present my third Annual Report, which is the Sixty-fourth Annual Report on the health of the City.

HEALTH STATISTICS.—The health statistics of the year 1936 are very favourable and should be a source of encouragement to all who are engaged in preventing and treating sickness in the City. The general death rate, *i.e.* 11.81, as compared with 12.1 for England and Wales, was the lowest for the past five years, and considerably below that of the average of the previous ten years (12.24). Among the 20 largest towns of the country Portsmouth takes second place (Table VI)—the first time in our records that so high a position has been attained.

Several other low records were made—(a) the number of deaths from pulmonary tuberculosis, (b) the number of deaths from all forms of tuberculosis, and (c) the number of deaths from the seven principal zymotic diseases, are each the lowest in the statistical annuals of the City. The maternal mortality rate, *i.e.* 2.21, as compared with 3.65 for the country as a whole, is the second lowest on record. The infantile mortality rate, or the number of deaths of infants per 1,000 live births occurring in the same year, was 49.6, as compared with 59 for England and Wales. It is slightly higher than that for the previous year (46), but considerably below the average for the preceding 10 years (55.8).

CONTROL OF INFECTIOUS AND OTHER DISEASES.—

No epidemics of any note occurred.

Deaths from diphtheria show a marked reduction from 39 to 8, due to fewer cases of the gravis type of the disease and also to the specialised technique employed by the Resident Medical Officers at the Infectious Diseases Hospital, massive doses of antitoxin intravenously and intramuscularly being employed. The returns showing the number of children immunised are disappointingly small and not commensurate with the effort expended. No fully immunised child developed diphtheria during the year.

It will interest those parents who find difficulty in believing that measles is one of the chief killing diseases of childhood to know that last year more children died from this disease than from scarlet fever and diphtheria together. When the new extensions at the Infectious Diseases Hospital are completed it is my intention to recommend that all cases of measles and of whooping cough from poor homes, or where the dreaded complication—broncho-pneumonia—is likely to occur, should be admitted. Not only will many lives be saved but the incidence of complications, *e.g.* discharging ears, deafness, impaired vision, latent tuberculosis, etc.—will be diminished. Towards the end of the year under review a Scheme was launched for the prevention or attenuation of measles by the injection of blood serum.

The death rate from all forms of tuberculosis continues to diminish, falling in 1936 to the unprecedented figure of 0.81 deaths per 1,000 living. Fifty years ago the death rate from all forms of tuberculosis was 2.84, or nearly $3\frac{1}{2}$ times as great. In other words, if there had been the same death rate last year as in 1886, 715 persons instead of 204 would have died from the disease in Portsmouth.

Unfortunately, the same downward trend is not manifest in the case of cancer, although in 1936 the number of deaths, *i.e.* 410, is exactly the same as in the previous year. The City Council have approved a recommendation of the Health Committee to instal at Saint Mary's Hospital powerful Deep and Superficial X-ray plants at a cost of £2,000 for the treatment of this disease, and a co-ordinated effort is being made to improve the facilities for diagnosis and radiological treatment in the Wessex Area. In accordance with Ministry of Health Circular 1561, fuller information in regard to cancer has been given this year in the body of the Report.

INSPECTION AND SUPERVISION OF FOOD.—The percentage of samples of Food and Drugs found to be adulterated (3.5 per cent.) was more than that for the previous year (3.0 per cent.), but was still much lower than the figure for the country as a whole (5.5 per cent.). The quality of ice cream sold in the City continues to improve.

A census taken during the year showed that the consumption of milk per head in the City is 0.488 pints per day.

During the year further progress was made towards the establishment of a Public Abattoir and it is confidently expected that in my next Report a definite step forward will be reported towards ending, once and for all, the present unsatisfactory method of meat inspection and supervision. Though the meat traders assist the Department as much as they can by surrendering obviously diseased meat, it is impossible for proper inspection to be carried out.

HOUSING.—For the first time there has been a slight slowing up of the work in connection with the Council's Five Years' Housing Programme, due to various unexpected difficulties. The Minister of Health, however, in anticipation of unavoidable delays encountered by Local Authorities has arranged to extend the time, by which houses ranking for Government subsidy should be completed, from March, 1938, to December, 1938.

At the Public Inquiries presided over by the Ministry of Health's Inspector, every opportunity is given to objectors to state their case and each house is visited by the Inspector after the Inquiry. So meticulous has been the care taken in scheduling each area, and so closely has the standard of unfitness laid down in the Act been interpreted, that out of 21 areas with 730 houses dealt with to date, the classification of only 4 has been modified by the Minister, that is 0.54 per cent. of 730 houses.

OVERCROWDING.—The gigantic task of surveying 55,937 separate dwellings in connection with the Overcrowding Survey was completed by the end of the year with the able assistance of a temporary staff of enumerators, surveyors and clerks. The Survey revealed that 992, or 1.77 per cent. of the dwellings were overcrowded within the meaning of the Act, the greatest degree of overcrowding existing in Portsea Ward (5.84 per cent.) and Saint Mary's Ward (3.51 per cent.).

CO-OPERATION OF MEDICAL PRACTITIONERS IN THE DISTRICT.—Each year statutory enactments are bringing General Medical Practitioners into closer relationship with the Municipal Health Services, and there are now very few activities of the Health Department with which General Practitioners are not associated. Last year £4,773 was paid in fees by the Local Authority to 113 General Medical Practitioners in respect of professional or statutory services. As a member of the Executive Committee of the Portsmouth Division of the British Medical Association, I have been able to consult periodically with the elected representatives of the medical profession in the City in regard to new developments, and I am glad to say that close and cordial co-operation exists.

It is important that members of the medical profession should be acquainted with the progress of the work of the Health Services in which they play a part. Accordingly, the Health Committee have decided to forward to each Medical Practitioner a copy of this Report. I would refer them particularly to the chapters on “Hospital and Other Services,” “Prevalence of and Control over Infectious and Other Diseases,” “Maternity and Child Welfare” and “Health Education,” and I take the opportunity of thanking them for their co-operation during the year, especially in regard to the Schemes for Active Immunisation against Diphtheria and the Prevention of Measles by the injection of Human Serum.

NEW DEVELOPMENTS.—The year 1936 is noteworthy as the first year in which there came into operation many new schemes in the development of the Health Services, all of which were described in my last Annual Report, *e.g.*—

- (a) more effective co-operation of the School Medical Service with the Health Services ;
- (b) simplification of the administrative machinery of the Public Health Hospitals ;
- (c) admission of cases (with certain exceptions) to Saint Mary's Hospital through the Health Department instead of through the Relieving Officer ;
- (d) admission to Saint Mary's Hospital and the Infectious Diseases Hospital of cases from neighbouring outside districts in accordance with one of the main objects of the Local Government Act, 1929, *i.e.* to concentrate medical services in the larger centres of population where better facilities are available for diagnosis and specialised treatment ;
- (e) establishment of new departments and a training school for male nurses at Saint Mary's Hospital ;
- (f) re-organisation of the work of the Infectious Diseases Hospital, including the establishment of a Hospital Laboratory, Dispensary and a Training School for Nurses ;
- (g) arrangements for close liason between the Public Health and the Voluntary Hospitals ;
- (h) closing down of the uneconomical maternity unit at the Maternity Hospital, Fratton, and the transfer of services to the new maternity section at Saint Mary's Hospital, followed by the appointment of a consulting obstetrician ;
- (i) opening of new maternity and child welfare clinics ; and
- (j) inauguration of an annual Health Education Campaign.

How far each of these new developments has succeeded is described in the following Report.

Each year more and more responsibilities are being placed upon the Health Department by Acts of Parliament, Circulars and Memoranda of the Ministry of Health. As an indication of the enormous increase in the work I may state that during the past few years the letters and reports sent out by the Department have nearly trebled.

The year 1936 was a record year in this respect—no fewer than three important Acts being placed on the Statute Book, *i.e.* the Midwives' Act, 1936, requiring the Local Authorities to inaugurate a whole-time Salaried Service of Midwives; the Housing Act, 1936; and the Public Health Act, 1936. In addition, an entirely new obligation has been placed on the Health Department to form a permanent organisation for the purpose of providing first-aid and hospital treatment in connection with the City's Scheme of Passive Air Defence—necessitating the enrolment and training, with the assistance of the St. John Ambulance Brigade and the British Red Cross Society, of some 2,000 personnel.

COST OF THE HEALTH SERVICES.—The development of the Health Services on the lines indicated above has been achieved so far with the minimum of expenditure and it is pleasing to be able to record that the rate expended for Health Services in the City is still the lowest of the 20 largest towns in the country. From the latest figures available the average cost per patient per week of Saint Mary's Hospital is the second lowest of any Municipal General Hospital appropriated by the Health Committees of the 20 largest towns. It will be appreciated that wise expenditure on health, while the results may not be immediately manifest, will ultimately bring in a rich dividend expressed in lower mortality and morbidity rates and increased health and happiness of the citizens.

Further particulars regarding the schemes and changes outlined above are given in the body of the Report, which has been divided into sections for purposes of clarity and easier reference. At the beginning of each section I have summarised the important changes and indicated their bearing on the work of the Department as a whole. Thereafter follows a brief description of the routine work of the sub-department by the Senior Medical Officer in charge.

Figures for the previous year are included in brackets for comparative purposes.

The work of a particularly busy year has been much facilitated by the unfailing sympathy and support of the Chairman and Members of the Health Committee, and by the valuable help given most willingly at all times by every member of my staff. I desire also to express my appreciation of the courtesy extended to me by the chief officers of the Corporation and the various Committees with which I have been associated during the year.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,

Medical Officer of Health.

SUMMARY FOR 1936

Civil Population (estimated to middle of 1936) 251,400

1.—GENERAL STATISTICS.

Area in Acres (land and inland water) .....	.....	.....	9,217
Population (Census, 1931) .....	.....	.....	Total 249,283
Number of Inhabitated Houses .....	.....	.....	62,746
Rateable Value, 1936-37 .....	.....	.....	£1,845,123
Sum represented by a Penny Rate .....	.....	.....	£7,293
Average number of persons in each house (Census, 1931)			4.5
Average number of persons per acre (Census, 1931)			31.3
Total Rainfall .....	.....	.....	28.81 inches 731.7 millimetres

2.—EXTRACTS FROM VITAL STATISTICS.

				Total	Male	Female		
LIVE BIRTHS :								
Legitimate	....	....	3,682	1,876	1,805	}	Rate per 1,000 population 15.56
Illegitimate		....	232	122	111		
Total	....	....	3,914	1,998	1,916		
STILLBIRTHS :								
Legitimate	....	....	130	65	65	}	Rate per 1,000 total births 35.96
Illegitimate		....	16	10	6		
Total	....	....	146	75	71		
DEATHS	....	....	2,971	1,486	1,485	}	Rate per 1,000 population 11.81
Deaths from diseases and accidents of pregnancy and childbirth :								
From Puerperal Sepsis		....	3	From other Puerperal causes		....	6
Mortality rate per 1,000 total births :								
From Puerperal Sepsis		....	0.73	From other Puerperal causes		....	1.47
Total maternal mortality rate				....	2.21		
Death Rate of Infants under one year of age :								
All Infants per 1,000 live births				....	....	....	49.59
Legitimate Infants per 1,000 legitimate live births				....	....	....	47.52
Illegitimate Infants per 1,000 illegitimate live births				....	....	....	81.89

**NATURAL AND SOCIAL
CONDITIONS**

POPULATION.—The estimated population of the City at mid-1936 according to the Registrar-General, was 251,400, or 1,200 more than in the previous year. The increase is doubtless partly due to the excess of births over deaths (943) and to immigration.

MARRIAGES.—The number of marriages during 1936 was 2,245, which is 53 less than last year but greater than any other year since 1920.

BIRTHS.—There were 207 more births during 1936 than during the previous year, and this is no doubt connected with the record number of marriages consummated during 1935. The total number of live births was 3,914, equivalent to a birth-rate of 15.56, as compared with 3,707 births and a birth-rate of 14.81 for the previous year. The birth-rate for England and Wales was 14.8

DEATHS.—The general death-rate 11.81, which is just lower than last year (11.82), is the lowest during the past five years and is considerably lower than the average death-rate for the previous ten years (1926-1935)—12.24. The general death-rate for England and Wales was 12.1. From Table VI it will be seen that Portsmouth takes second place among the twenty largest towns in the country.

Only 194 deaths occurred amongst infants under one year of age, giving an infantile mortality rate of 49 per 1,000 births, as compared with 59 for England and Wales.

COMPARISON WITH PREVIOUS YEAR.

					1936 Population		1935 Population	
					Total—251,400		Total—250,200	
					Number	Rate per 1000 living	Number	Rate per 1000 living
BIRTHS	....	....	....	....	3,914	15.56	3,707	14.81
DEATHS	....	....	....	....	2,971	11.81	2,959	11.82
„	Principal Zymotic Diseases	....	....	....	44	0.17	71	0.28
„	Small-pox	....	....	....	—	—	—	—
„	Measles	....	....	....	14	0.05	—	—
„	Scarlet Fever	....	....	....	2	0.00	6	0.02
„	Diphtheria	....	....	....	8	0.03	39	0.15
„	Whooping Cough	....	....	....	1	0.00	9	0.03
„	Fever (Typhoid & Para-typhoid)	....	....	....	2	0.00	1	0.00
„	Diarrhoea (under 2 years)	....	....	....	17	0.06	16	0.05
„	Pulmonary Tuberculosis	....	....	....	171	0.68	192	0.76
„	Cancer	....	....	....	410	1.63	410	1.63
„	Influenza	....	....	....	33	0.13	45	0.17
					Number	Rate per 1000 Births	Number	Rate per 1000 Births
„	Under 1 year of age	....	....	....	194	49	171	46

AVERAGE DEATH-RATE for previous Ten years (1926-1935) 12.24

TABLE I. Vital Statistics of Whole District during 1936 and previous years.

YEAR	Population estimated to Middle of each Year	BIRTHS		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT		
		Un-corrected Number	Nett.		Rate	of Non-residents registered in the District	of Residents not registered in the District	Under 1 Year age	At all Ages	
			Number	Rate				Number	Rate per 1,000 Nett Births	Number Rate
1910	227,821	5801	....	25.41	2995	13.14	....	603	104	....
1911	232,221	5787	5775	24.99	3101	13.40	72	734	127	3067
1912	236,732	5605	5570	23.60	3141	13.31	81	466	85	3125
1913	241,256	5989	5966	24.34	3096	12.63	82	545	91	3080
1914	245,827	5714	5678	23.17	3176	12.96	98	486	85	3149
1915	202,441	4975	4949	24.44	3405	16.81	125	433	87	3284
1916	197,848	5186	5184	24.09	2987	15.09	176	418	80	2937
1917	198,527	4613	4584	20.71	3081	15.51	112	326	71	2902
1918	203,396	4778	4774	20.90	3730	18.33	197	361	75	3647
1919	224,846	5300	5139	21.94	3006	13.37	190	383	74	2981
1920	233,805	6520	6520	25.85	2705	11.10	118	393	60	2640
1921	233,929	5662	5651	22.90	2704	11.55	120	355	63	2612
1922	236,630	5465	5529	22.10	2920	12.34	142	349	63	2874
1923	230,718	5338	5314	21.06	2540	11.00	108	276	52	2524
1924	232,000	5096	5022	20.10	3003	12.94	81	348	66	2977
1925	232,900	4888	4770	19.07	2912	12.50	94	297	61	2866
1926	231,500	4636	4496	18.20	2746	11.86	110	257	54	2703
1927	232,100	4352	4230	17.08	3006	12.95	108	234	55	2845
1928	240,700	4579	4445	17.21	2864	11.89	121	245	55	2730
1929	242,000	4519	4394	16.80	3429	14.16	134	293	66	3345
1930	242,000	4409	4261	16.30	2927	12.09	153	250	59	2856
1931	228,900	4454	4336	17.49	3035	13.25	142	239	55	2950
1932	253,100	4192	4092	16.21	3150	12.48	153	246	60	3101
1933	251,200	4001	3864	15.38	3171	12.62	145	203	52	3125
1934	248,900	4041	3948	15.86	3140	12.61	133	175	44	3077
1935	250,200	3861	3707	14.81	3003	12.00	150	171	46	2959
1936	251,400	4102	3914	15.56	3064	12.18	114	194	49	2971
							77			11.81

TABLE II.

Table showing the Population, Marriages, Inhabited Houses, Births and Deaths, for the year 1936, and the ten preceding years.

GROSS NUMBERS.

Year	Estimated Civil Population	No. of Inhabited Houses	Marriages	Registered Births	Total Number of Deaths		
					Total all ages	Under 1 year	Under 5 years
1936	251,400	62,746	2,245	3,914	2,971	194	258
1935	250,200	62,150	2,298	3,707	2,959	171	220
1934	248,900	61,500	2,217	3,948	3,077	175	282
1933	251,200	60,529	2,140	3,864	3,125	203	306
1932	253,100	59,780	2,164	4,092	3,101	246	338
1931	228,900	58,106	2,067	4,454	2,950	239	336
1930	242,000	57,591	2,242	4,409	2,856	250	415
1929	242,000	56,861	2,017	4,519	3,345	293	438
1928	240,700	54,740	2,100	4,579	2,669	242	359
1927	232,100	54,068	1,981	4,349	2,877	235	410
1926	231,500	53,279	1,950	4,636	2,703	247	395
Average 10 years 1926-35	242,060	57,859	2,117	4,255	2,965	218	349

TABLE III.

Table showing Population, Acreage, Density, Birth-rate, Death-rate, Infantile Mortality-rate and Tuberculosis Death-rate in each of the Wards of the City.

WARD		Area in Acres	Population Census 1931	Density per Acre	Birth Rate (Per 1000 Pop.)	Death Rate (Per 1000 Pop.)	Infantile Mortality Rate (Per 1000 Births)	Tuberculosis (All Forms) Death Rate (Per 1000 Pop.)
1.	St. Thomas	575	17,088	29.71	12.87	13.46	50	0.70
2.	Portsea	480	21,339	*44.45	13.75	10.34	61	0.84
3.	Nelson	235	15,739	66.97	15.12	10.48	50	0.46
4.	North End	743	15,523	20.89	17.41	10.89	63	0.90
5.	Buckland	189	14,493	76.68	16.42	11.11	50	0.76
6.	Kingston	737	16,791	22.78	15.53	9.70	49	0.54
7.	Highland	447	14,472	32.37	12.99	9.81	21	0.76
8.	St. Simon	341	16,560	48.56	12.40	11.89	39	0.54
9.	Havelock	196	15,772	80.47	12.30	12.30	87	0.82
10.	St. Paul	183	15,717	85.88	15.88	13.91	44	1.08
11.	Guildhall	172	16,500	95.92	15.55	12.83	54	0.03
12.	Fratton	184	13,080	71.08	13.99	11.92	49	0.84
13.	St. Mary	138	16,165	117.13	17.35	11.88	68	0.68
14.	Charles Dickens	142	15,138	106.00	14.92	12.41	53	1.45
15.	Cosham	3,167	11,233	3.54	27.86	17.53	42	0.98
16.	Meredith	1,288	16,815	13.05	17.73	10.90	14	0.65
WHOLE CITY		9,217	252,425	27.39	15.56	11.81	49	0.81

* The density of Portsea Ward excluding the Dockyard is 112.3.

TABLE IV.

Showing Births and Deaths Registered in Portsmouth during the four quarters ending 31st December, 1936.

QUARTER	BIRTHS	STILLBIRTHS	DEATHS	Deaths of Infants under 1 year of age	Deaths from							Rate per 1,000 living		Death-rate per 1,000 living						Death-rate per 1,000 Births	
					Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Total Births	Total Deaths	Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Infants under 1 year
1st Qtr.	1027	33	835	59	—	1	2	—	6	20	2	16.50	13.41	—	0.02	0.03	—	0.10	0.32	1.9	57.44
2nd Qtr.	1141	42	768	43	1	8	1	—	1	8	4	18.08	12.17	0.02	0.13	0.02	—	0.02	0.13	3.4	37.68
3rd Qtr.	1006	40	609	35	—	4	—	—	—	2	4	15.94	9.65	—	0.06	—	—	0.03	0.03	3.8	34.79
4th Qtr.	891	42	773	57	1	1	—	1	1	2	9	14.12	12.25	0.02	0.02	—	0.02	0.03	9.7	63.97	
TOTAL	4075	157	2985	194	2	14	3	1	8	32	19	16.83	11.87	0.01	0.06	0.01	0.00	0.03	0.13	4.6	45.84

The above statistics have been taken from the Quarterly Reports, and have not been corrected.

TABLE V.

Table showing the Annual Birth-rate, Rate of Mortality, and Death-rates among children for the year 1936, and ten preceding years.

Year	Birth-rate per 1,000 of the Population	Annual Rate of Mortality per 1,000 living from all causes	Annual Rate of Mortality per 1,000 living from 7 Principal Zymotic Diseases	Deaths of Children under 1 year Percentage to total Deaths	Proportion of Deaths of Children under 1 year per 1,000 Registered Births	Deaths of Children under 5 years : Percentage to total Deaths
1936	15.56	11.81	0.17	6.5	49	8.7
1935	14.81	11.82	0.28	5.7	46	7.4
1934	15.86	12.36	0.34	5.6	44	9.1
1933	15.38	12.44	0.23	6.4	52	9.7
1932	16.21	12.28	0.36	7.9	60	10.9
1931	17.49	12.88	0.31	8.1	55	11.3
1930	16.30	11.80	0.71	8.7	59	14.5
1929	16.80	13.82	0.49	8.7	66	13.0
1928	17.21	11.34	0.41	8.9	55	13.2
1927	17.08	12.68	0.52	7.9	55	13.9
1926	18.20	11.67	0.60	9.1	54	14.6
Average of 10 yrs. 1926-35	16.52	12.24	0.42	7.6	53	11.8

TABLE VI.

Showing the Population, Birth-rates, Death-rates, Zymotic Death-rates, Maternal Mortality, etc., in 20 Large Towns for the year 1936.

NAME OF TOWN	Population as estimated by the Registrar General Mid-1936	Compara- bility Factor	Per 1,000 Population		Death Rate as adjusted by Factor	RATES PER 1,000 POPULATION FROM:—										Infantile Mortality Rate	MATERNAL MORTALITY (per 1,000 Total Births)		
			Birth Rate	Crude Death Rate		Small- pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Typhoid and Para- typhoid	Diarrhoea (under 2 years)	Influenza	Tuberculosis			From Sepsis	From Other Causes	Total
1. CROYDON	241,739	—	13.4	—	10.7	—	0.09	0.01	0.06	0.03	0.02	0.09	0.16	0.55	0.08	41	1.48	2.08	3.53
2. PORTSMOUTH	251,400	0.99	15.56	11.81	11.69	—	0.05	0.00	0.00	0.03	0.00	0.06	0.13	0.68	0.13	49	0.73	1.47	2.21
3. LEICESTER	261,800	1.02	14.46	11.57	11.80	—	—	—	0.04	0.03	0.00	0.08	0.13	0.78	0.11	58	2.3	1.0	3.3
4. BRISTOL	413,900	0.98	14.24	12.27	12.02	0.00	0.10	0.01	0.04	0.04	0.00	0.06	0.11	0.71	0.10	48	1.46	1.64	3.10
5. SHEFFIELD	518,200	1.13	15.21	10.81	12.22	—	0.08	0.01	0.08	0.17	0.00	0.09	0.10	0.58	0.10	59	1.34	2.56	3.90
6. PLYMOUTH	206,400	0.98	14.8	12.5	12.25	—	0.01	0.00	0.09	0.19	0.01	0.06	0.02	0.60	0.13	56	1.57	1.25	2.82
7. BIRMINGHAM	1,038,000	1.10	15.8	11.3	12.4	—	0.04	0.01	0.10	0.06	0.00	0.08	0.13	0.71	0.07	62	1.47	2.06	3.53
8. LONDON	4,141,100	1.02	13.59	12.35	12.60	—	0.14	0.01	0.07	0.05	0.01	0.20	0.13	0.69	0.09	66	0.72	1.14	1.86
9. WEST HAM	265,800	1.15	15.7	11.6	13.3	—	0.18	0.01	0.06	0.05	0.00	0.27	0.11	0.70	0.10	70	0.7	1.1	1.8
10. CARDIFF	221,500	1.06	15.1	12.6	13.3	—	0.01	0.01	0.05	0.07	0.02	0.09	0.18	0.87	0.18	55	2.60	1.15	3.75
11. NOTTINGHAM	279,400	1.03	15.20	13.21	13.61	—	0.08	0.02	0.09	0.09	0.00	0.15	0.09	0.83	0.10	89	1.13	3.38	4.51
12. HULL	321,500	1.10	18.4	12.7	14.0	—	0.21	0.01	0.02	0.39	—	0.18	0.12	0.79	0.16	65	1.30	1.95	3.25
13. SUNDERLAND	184,179	1.12	19.6	12.8	14.3	0.00	0.01	0.02	0.06	0.16	0.02	0.34	0.17	0.78	0.13	72	1.38	2.22	3.60
14. LEEDS	489,800	1.07	14.99	13.61	14.56	—	0.10	0.02	0.06	0.07	—	0.14	0.13	0.71	0.13	65	1.30	1.83	3.13
15. NEWCASTLE	290,400	1.13	15.6	13.1	14.8	—	0.06	0.03	0.02	0.12	0.01	0.36	0.13	0.90	0.14	90	2.12	3.81	5.92
16. LIVERPOOL	867,110	1.15	20.07	12.90	14.83	0.00	0.20	0.00	0.12	0.16	0.00	0.15	0.08	0.82	0.14	75	1.10	2.43	3.53
17. BRADFORD	290,500	1.00	13.42	14.92	14.92	—	0.05	0.02	0.04	0.18	0.01	0.13	0.19	0.52	0.14	82	1.46	3.18	4.64
18. STOKE-ON-TRENT	273,100	1.22	16.8	12.4	15.1	0.00	0.13	0.02	0.06	0.07	0.01	0.16	0.13	0.73	0.12	74	1.03	2.28	3.31
19. MANCHESTER	759,058	1.14	14.71	13.50	15.39	—	0.16	0.01	0.06	0.12	0.00	0.09	0.17	0.87	0.14	77	1.69	3.29	4.98
20. SALFORD	206,000	1.18	15.0	14.0	16.5	—	0.24	0.03	0.11	0.15	—	0.21	0.12	0.98	0.14	90	1.5	3.7	5.2

NATURAL CONDITIONS.

The following extract from the description of Southsea inserted by the Council in the Official Handbook of the British Health Resorts Association, briefly summarises the natural conditions.

“ Sheltered from the north by the Portsdown Hills, a range of the South Downs, Southsea has a southern aspect, facing the Isle of Wight, from which it is separated by Spithead and the Solent.

CLIMATE.—The climate is sunny, equable and dry. The atmosphere is exceptionally clear and bright and there is but little fog or mist. Snow is rarely seen. The meteorological records, 1927-36, show average maximum temperature 59.3° , annual sunshine 1,761 hours, annual rainfall 29.55 inches. The Invalids' Winter (November to March) is very sunny, averaging 2.66 hours per day, or 28 per cent. of the possible duration ; very mild with average maximum temperature of 48.8° and rainfall only 14.12 inches.

SEA BATHING.—There is a long beach of sand and shingle suitable for bathing. Bathing shelters, with sun huts and tents are provided. There are no strong currents. The average sea temperatures are May 53° , June 56° , July 60° , August 66° , September 60° . A covered sea water swimming bath at a temperature of 75° is provided by the Corporation. In 1935, a large and up-to-date water pool (220 feet by 60 feet) was opened for bathers and water sports at Hilsea. The City Council have recently approved the erection, at a cost of £60,000, of a large indoor swimming bath capable of accommodating 1,000 spectators, together with an extensive suite of Medical Baths.

INDICATIONS.—The climate is found beneficial to delicate children and elderly persons and to those suffering from anaemia and debility, rheumatism, asthma, bronchial catarrh and chronic phthisis, for whom sunshine in a warm and equable climate is desired. Persons suffering from diseases of the circulatory system also do well in this locality, where the absence of hilly ground enables such cases to get fresh air and exercise without undue fatigue. The temperate nature of the climate makes Southsea a very popular resort for people who have resided in the tropics, or for patients suffering from tropical ailments or their after-effects. The extreme purity of the water supply reduces the tendencies to digestive diseases and summer diarrhoea in children is almost unknown.

WINTER ATTRACTIONS.—Indoor bowling green, golf, promenade on the sea front from which is obtained a constant panorama of warships, liners, etc., entering or leaving the Solent, chess and bridge clubs, theatres, cinemas, concerts, military bands and all the amenities of the adjacent large City of Portsmouth.”

METEOROLOGICAL CONDITIONS, Etc.

Summary of Meteorological Statistics, 1936.

Barometer.—The mean barometer pressure for the year was 29.946 inches. The highest observed reading corrected to sea-level was 30.702 on December 23rd, and the lowest 28.984 on January 29th.

Temperature.—The mean temperature in the shade was 51.8° , or 1.0° above the normal.

MAXIMUM.—The mean maximum temperature in the shade was 57.4° , the highest being 80° on June 19th.

MINIMUM.—The mean minimum temperature was 46.1° , the lowest being 28° on February 12th, December 8th and 13th.

MINIMUM ON GRASS.—The mean minimum temperature on the grass was 39.3° , the lowest being 17° on December 11th.

EARTH TEMPERATURE.—The mean temperature at 1 foot below the ground was 52.6° , and that at 4 feet 52.3° .

Bright Sunshine.—1629.1 hours of sunshine were registered by the Campbell-Stokes Recorder. The greatest amount registered on one day was 14.7 hours, viz. on June 24th.

Frosts.—The minimum thermometer in the shade, four feet above the ground fell to and below freezing point on 25 days, and that on the ground on 59 occasions.

Humidity.—The mean humidity of the air (Saturation 100) was 85.6.

Rainfall.—The total rainfall was 28.81 inches, or 0.95 inches below the normal. The greatest fall of rain in 24 hours was 1.59 inches, on November 11th.

Hail.—Hail occurred on 2 occasions.

Thunder.—Thunder occurred on 10 occasions.

Snow.—Snow or Sleet fell on 5 occasions.

Fogs.—Fogs occurred on 16 occasions.

Gales.—Gales occurred on 18 occasions.

Averages for the Past Ten Years, 1927 to 1936.

	<i>Hours of Bright Sunshine</i>	<i>Mean Temperature</i>	<i>Humidity (Saturation 100)</i>
<i>Rainfall</i>			
29.55	1761.5	51.5	83.0

TABLE SHOWING SUNSHINE, RAINFALL AND EXTREMES OF TEMPERATURE SINCE 1890.

Year	Total Sunshine	Total Rainfall in ins.	Highest Maxi- mum in Shade of	Date	Lowest Maxi- mum in Shade of	Date	Lowest Mini- mum in Shade of	Date	Lowest Mini- mum on Grass of	Date
1890	1350	21.71	77	May 24th	30	Dec. 16th	18	Dec. 31st	10	Jan. 7th
1891	1247	31.43	78	May 16th, Sept. 12th	31	Jan. 6th	19	Jan. 18th	8	Jan. 10th, 11th
1892	1371	22.27	77	July 27th	29	Jan. 9th	19	Jan. 10th	13	Dec. 27th
1893	1412	23.14	85	June 18th	29	Jan. 2nd	20	Jan. 2nd	12	Jan. 5th
1894	1600	35.89	82	July 1st	25	Jan. 4th	14	Jan. 5th, 6th	13	Jan. 5th, 6th
1895	1811	27.26	79	Sept. 28th	25	Feb. 6th	17	Feb. 6th, 7th	5	Feb. 13th
1896	1566	25.79	81	July 21st	32	Feb. 25th	24	Feb. 26th	19	Feb. 26th
1897	1569	28.48	86	July 16th	32	Jan. 23rd	24	Jan. 24th	16	Dec. 4th
1898	1454	22.67	81	Aug. 16th	37	Feb. 21st	27	Feb. 21st	19	Feb. 21st
1899	1929	25.26	84	Aug. 3rd	30	Dec. 14th	22	Dec. 14th	16	March 25th
1900	1608	25.96	85	July 25th	35	Feb. 3rd	22	Feb. 10th	16	Feb. 8th, 10th
1901	1843	23.41	84	July 19th	32	Jan. 7th	20	Jan. 9th	14	Jan. 9th
1902	1501	25.27	82	July 19th	32	Dec. 6th	23	Dec. 7th	15	Feb. 12th, 13th, 16th
1903	1702	34.88	80	June 1st, July 9th	32	Jan. 12th	23	Jan. 15th	12	Dec. 3rd
1904	1732	26.64	79	July 17th	30	Jan. 2nd	25	Jan. 1st	13	Jan. 21st
1905	1685	24.05	80	July 21st, 26th	35	Jan. 1st, Nov. 17th	24	Nov. 24th	15	Jan. 9th, Nov. 21st
1906	1705	28.74	79	Sept. 1st	34	Dec. 26th	25	Jan. 24th	13	Feb. 14th
1907	1594	25.33	79	July 16th	29	Jan. 23rd, 24th	20	Jan. 24th	14	Jan. 25th
1908	1951	20.53	83	July 2nd	35	Jan. 11th	17	Dec. 30th	11	Jan. 6th
1909	1902	32.28	85	Aug. 12th	34	Mar. 3rd	20	March 3rd	10	Jan. 27th
1910	1691	31.66	76	May 23rd	35	Jan. 26th	21	Jan. 27th	13	Jan. 16th
1911	2108	30.06	90	Aug. 14th	35	Jan. 15th	25	Jan. 16th	17	Feb. 3rd
1912	1561	31.94	89	July 15th	32	Feb. 2nd	20	Feb. 3rd	12	Dec. 25th
1913	1584	29.96	81	June 29th	36	Dec. 29th, 30th	29	Jan. 13th, April 13th	19	Jan. 24th
1914	1914	33.13	79	Aug. 13th, 14th	33	Jan. 19th	25	Dec. 29th, 31st	14	Nov. 27th
1915	1776	37.41	79	July 2nd	36	Jan. 28th	27	Jan. 23rd	18	Dec. 17th
1916	1628	28.48	82	Aug. 2nd	34	Feb. 25th	25	Jan. 26th	17	Feb. 3rd
1917	1718	25.93	78	July 16th, 17th	31	Jan. 26th, 27th	20	Feb. 5th	13	Feb. 18th
1918	1874	25.80	83	Aug. 22nd	36	Jan. 3rd, 4th	23	Jan. 9th	16	Dec. 17th
1919	1784	29.06	82	Aug. 10th, 13th	31	Jan. 31st	24	Jan. 25th, Feb. 8th, 9th	17	Dec. 16th
1920	1584	28.00	78	May 24th	31	Dec. 12th	22	Jan. 7th	22	Nov. 13th
1921	2065	14.00	89	July 19th	38	Feb. 7th	26	Nov. 15th	18	Nov. 13th
1922	1809	30.24	79	May 23rd, 24th	37	Feb. 6th	26	Jan. 24th, 25th	19	Jan. 18th
1923	1770	29.54	89	July 12th	34	Dec. 25th	23	Nov. 26th	17	Nov. 16th
1924	1760	36.59	77	July 12th	37	Feb. 20th, 27th	27	Feb. 18th, 29th	21	Feb. 15th
1925	1923	38.10	82	June 7th	35	Dec. 14th	26	March 19th	17	Nov. 14th
1926	1688	26.40	85	July 14th	32	Jan. 14th	22	Jan. 15th, 17th	18	Jan. 15th, 17th, Dec. 28th
1927	1653	34.00	80	July 10th	29	Dec. 19th	24	Dec. 15th	15	Jan. 20th
1928	1923	32.51	88	July 15th	37	Dec. 14th	25	Mar. 12th, 14th, Dec. 15th	17	Dec. 9th, 15th
1929	1986	28.00	87	Sept. 5th	26	Feb. 13th	16	Feb. 15th	7	Feb. 15th
1930	1730	30.65	83	August 28th	38	Dec. 5th	24	March 20th	16	Nov. 17th
1931	1503	27.76	77	August 3rd, 5th	33	Jan. 8th, March 9th	21	March 10th	16	March 9th
1932	1512	26.77	84	August 18th	31	Feb. 10th	26	Jan. 1st, Feb. 11th, Mar. 13th	18	Jan. 1st
1933	2086	21.07	85	August 7th	33	January 24th	23	January 27th	19	December 9th
1934	1818	29.85	85	July 18th	38	Jan. 21st, Feb. 2nd	25	February 3rd	18	February 3rd
1935	1764	36.29	86	July 14th	33	December 20th	24	December 21st	20	December 21st
1936	1629	28.81	80	June 19th	34	February 11th	28	February 12th	17	December 11th
						December 8th, 13th				

TABLE IX.
MONTHLY WEATHER SUMMARY FOR THE YEAR 1936.

Month	Mean Barometer ins.	Mean Temp. °F.	ABSOLUTE		MEAN		Mean Daily Range °F.	SUNSHINE		RAINFALL			Relative Humidity (Saturation 100)
			Max. °F.	Min. °F.	Max. °F.	Min. °F.		Total No. of hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.	Days of 0.01 ins. or more	
January ...	29.548	43.6	54	31	47.4	39.9	7.5	40.2	16	117.0	4.61	22	93
February ...	29.716	40.3	54	28	45.0	35.6	9.4	99.7	21	71.3	2.81	14	86
March ...	29.840	46.4	59	31	51.1	41.7	9.4	101.7	25	46.9	1.85	13	88
April	29.975	46.5	64	32	52.8	40.2	12.6	169.1	23	45.3	1.78	10	80
May	30.005	56.3	76	39	64.4	48.2	16.2	241.9	29	3.0	0.12	5	78
June	30.011	61.1	80	41	68.4	53.8	14.6	219.7	27	71.4	2.80	14	84
July	29.869	62.0	74	51	67.2	56.7	10.5	166.1	29	85.2	3.35	22	86
August ...	30.135	64.2	79	49	71.4	57.0	14.4	223.1	29	3.6	0.14	5	85
September ...	30.034	61.0	75	38	66.3	55.8	10.5	118.0	25	77.0	3.03	16	86
October ...	30.132	51.3	65	35	57.3	45.3	12.0	119.9	23	18.8	0.74	10	84
November ...	29.944	45.3	58	30	50.2	40.5	9.7	53.9	14	127.7	5.04	17	88
December ...	30.147	43.8	55	28	48.2	39.4	8.8	75.8	18	64.5	2.54	17	90
TOTAL ...	—	—	—	—	—	—	—	1629.1	279	731.7	28.81	165	—
MEAN ...	29.946	51.8	66.0	36.0	57.4	46.1	11.3	135.7	23.2	60.9	2.40	13.7	85.6

HOSPITAL AND OTHER SERVICES

(Figures for the previous year are included
in brackets for comparative purposes).

HOSPITAL AND OTHER SERVICES.

SAINT MARY'S MUNICIPAL HOSPITAL.

The process of developing this fine Hospital, built by the enterprise and foresight of the old Board of Guardians, along the lines of a Municipal General Hospital, was continued during the year. Many changes took place—all directed towards extending the usefulness of the hospital by bringing it into closer touch with the voluntary hospitals in the City and with the other health services of the City Council in accordance with the intention of the Local Government Act, 1929.

Change in Method of Admission.—The new arrangements for the admission of patients described in my last Report, *i.e.* with certain exceptions, that all cases be admitted through the Health Department instead of through the Relieving Officers—came into operation on April 1st of the year under review, and have worked very well. The average number of beds occupied during the year has increased from 884 to 937—the highest ever recorded, and there were periods when the hospital accommodation was taxed to its utmost. Relief will come only when the aged and infirm persons are transferred to the new Home which is being erected by the Public Assistance Committee on the old Children's Home in Saint Mary's Road.

Administration.—During the year the Steward's office staff was reorganised and brought into closer association with the Health Department. The staff was augmented to cope with the increasing demands on the Hospital and accommodated in more commodious premises rendered possible by the removal of the Resident Medical Officers to their new quarters.

The Hospital Governors Sub-Committee approved of a Scheme to reorganise completely the cleaning staff of the Hospital (by substituting in large measure non-resident maids

for cleaners), which will effect a saving of £150 per annum and enable the nurses, relieved of menial work, to devote more time to nursing duties.

The Hospital Governors Sub-Committee gave general approval to a scheme for providing for the nursing staff increased accommodation, which is urgently needed.

Co-operation with Voluntary Hospitals.—There is very close co-operation between Saint Mary's Hospital and the two Voluntary Hospitals of the City, *i.e.* the Royal Hospital and the Eye and Ear Hospital. Representatives of each Hospital meet every three months to discuss any new developments contemplated in any of the Hospitals. After free and frank discussion an amicable arrangement has invariably been reached with the object of preventing unnecessary and wasteful duplication of hospital services.

Amongst matters discussed by this joint Committee during the year were :—

- (a) the appointment of an Eye Consultant at Saint Mary's Hospital, to take effect as and from April 1st, 1937, for the purpose of visiting eye cases at Saint Mary's Hospital and other institutions of the City Council.
- (b) the establishment of a Fracture Clinic at the Royal Portsmouth Hospital.
- (c) a scheme for closer co-ordination in the Wessex Area of existing agencies for the diagnosis and radiological treatment of cancer. (See page 80).

The following Report of the Medical Superintendent indicates the increasing volume of work admirably carried out by the resident and part-time visiting medical staffs and the nursing staff, and the important part played by the Hospital in the health services of the City.

TABLE X. SUMMARY OF HOSPITALS SERVICES—VOLUNTARY AND MUNICIPAL.

HOSPITAL	SITUATION	DESCRIPTION	Number of Beds	MANAGEMENT	AREA SERVED	MEDICAL STAFF	NURSING STAFF
Royal Portsmouth Hospital	Commercial Road	General	250	Voluntary Committee	Portsmouth and surrounding district	5 Resident Medical Officers 26 Honorary Medical and Surgical Staff	80
Portsmouth and Southern Counties Eye & Ear Hospital	Pembroke Road	Diseases of the Eye, Ear, Nose & Throat	47	Voluntary Committee	Portsmouth and surrounding district	No resident Medical Officer 14 Honorary Medical and Surgical Staff	12
Saint Mary's Hospital	Milton Road	General and Lying-in	1050	*Health Committee of City Council	Portsmouth	1 Resident Medical Superintendent 6 Resident Assistant Medical Officers 8 Part-time Visiting Medical Officers	130 Nurses 69 Atttdts.
City Mental Hospital	Locksway Road, Milton	For Patients of Unsound Mind	1014	Committee of City Council	Portsmouth	1 Resident Medical Superintendent 2 Resident Assistant Medical Officers	89 male 121 female
Infectious Diseases Hospital	Milton Road	City Infectious Diseases Hospital (excluding smallpox)	206	Health Committee of City Council	Portsmouth	2 Resident Medical Officers 1 Non-resident Medical Officer <i>Consultants when reqd.</i>	45
Royal Naval, Maternity Home	Clifton Road, Southsea	Lying-in Cases. (Limited to the wives of men in the Royal Navy and Royal Marines)	15	Voluntary Committee	Portsmouth and District	1 Non-resident Medical Officer 2 Hon. Consultant Medical Officers	11
Military Families' Hospital	London Road, Hilsea	Lying-in Cases. (Limited to the wives of men in the Army and Royal Air Force)	9	Army Authorities	Portsmouth and District	1 Non-resident Medical Officer	8
Langstone Sanatorium and Beach Lodge	Locksway Road, Milton	Tuberculosis, early cases and Children	20 and 9 children	Health Committee of City Council	Portsmouth	1 Non-resident Medical Officer	4

* Saint Mary's Hospital was appropriated as a Municipal Hospital by the Council on December 6th, 1932.

REPORT ON THE WORK OF SAINT MARY'S HOSPITAL.

By R. C. MACPHERSON, M.B., Ch.B., *Medical Superintendent.*

The year 1936 was marked by a steady increase in the work of the Hospital and by a still greater and steadier pressure on the Hospital accommodation—the number of in-patients rising from 5,282 in 1935 to 5,407 in 1936. The average daily number of patients resident in the Hospital for the year rose to 937, the highest on any one day during the year being 995.

An extraordinary feature of the year was the fact that the pressure on our bed capacity was maintained during the entire summer period, instead of falling as usual during the summer.

The work of the Maternity Department showed a very great increase on the previous year, the total number of births being 756, as compared with 614 in 1935.

Maternal deaths—6	.....	=	8%
Stillbirths—41	.....	=	5.4%

These two features showed a slight rise, this being largely owing to the fact that more serious cases from Portsmouth and the County were sent to the Hospital as urgent admissions in a dangerous condition.

The neonatal deaths numbered 21, *i.e.* deaths occurring within 10 days of birth. This equals 2.77%, the lowest ever recorded.

In the Antenatal Department, the number of women attending was 1,144—an increase of about 400 over the previous year. These made 6,672 attendances.

The Post-natal Clinic treated 260 women, who made 454 attendances.

The enormous increase in the work of this Department has made it the busiest and about the most important Department of Saint Mary's Hospital, and proves that its appeal to the mothers of the City has increased and there is no doubt that the work of the Department should be of great benefit to that section of the community.

It is pleasing to record that no cases of Puerperal Fever occurred amongst the nursing mothers.

Summary of statistics relating to the Maternity Department.

Year ending	Births	Maternal Deaths	Still Births	Neonatal Deaths	Ante-Natal Dept.	
					Cases	Att'dances
31st Dec., 1929	136	4 (2.94%)	9 (6.61%)	4 (2.94%)	—	—
31st Dec., 1930	159	1 (.63%)	16 (10.06%)	5 (3.15%)	67	201
31st Dec., 1931	201	2 (.99%)	13 (6.46%)	9 (4.47%)	110	648
31st Dec., 1932	238	4 (1.68%)	14 (5.89%)	8 (3.36%)	138	980
31st Dec., 1933	278	2 (.72%)	20 (7.2%)	10 (3.6%)	287	1445
31st Dec., 1934	387	3 (.77%)	16 (4.13%)	11 (2.84%)	315	2545
31st Dec., 1935	614	2 (.32%)	28 (4.56%)	22 (3.58%)	751	3604
31st Dec., 1936	756	6 (.8%)	41 (5.4%)	21 (2.77%)	1144	6672
					*260	*454

* Post-Natal (3 months only)

During the year the operating theatre has been kept exceedingly busy, owing to the fact that three different surgical Departments were making use of the same theatre. In all 1,061 operations were performed in the operating theatre. Of these, 233 were major abdominal operations.

The Out-patients' Departments of the Hospital also show an increase in the number of patients attending and the number of attendances. In all 12,161 attendances were made during the year at these Departments, *i.e.* the electrical and massage, skin and X-ray Departments.

The year was marked by being the first year in which the Hospital was recognised for the training of male nurses and the first fully trained male nurse in the history of the Hospital qualified in May, 1936. There are now four male probationers in training in the Hospital and it is hoped that later in the year this number may be increased as soon as the necessary residential accommodation can be provided. It has been found that there is a demand for the services of male nurses from all over the country and many Authorities have made requests for the supply of these from this Hospital.

The opening of the new residential quarters for the Resident Medical Officers in April, 1936, by the Lord Mayor of the City, Alderman W. J. Avens, was a further step in the progress of

Saint Mary's. The quarters provided for the resident medical staff are a credit to the Health Committee and are as comfortable and well-equipped as any to be found in the Hospitals of this country.

Another improvement carried out by the Board of Governors during 1936 was the appointment of a ward-maid to each of the 18 medical and surgical wards of the Hospital. This has considerably eased the work of the ward sisters and probationers and has enabled your Committee to grant better leave conditions and off-duty times to the nurses of the Hospital, and enabled the probationers to spend more time in the duties of their profession and less time on the ordinary domestic or menial duties.

A fine new concrete road was built by the City Engineer's Department as an approach to the wards of the Hospital and the new Medical Officers' quarters, a new door was opened at the eastern end of the Hospital as a public entrance from this road.

The Hospital was visited by the Minister of Health in September, 1936, and also by a Visiting Commissioner of the Board of Control. Satisfaction was expressed by both of these distinguished visitors.

It was necessary during the year 1936 to house a large number of our nurses in the old Municipal Maternity Hospital at Clive Road. The increases of staff granted by the Board of Governors in order to meet the rapidly increasing work of the various Departments and to lighten the hours worked by the nurses of the Hospital could not be housed in the quarters provided for nurses in the Hospital, and the Board of Governors during the year discussed and approved in principle the provision of further and more suitable accommodation and living conditions for the nursing staff, envisaging the provision of a new nurses' home in the period 1937-38. This is a matter of urgency, which I trust the Board of Governors may be able to proceed with in a short time.

The Training School of the Hospital, which is one of the largest in the country, has worked efficiently and well, under the care of the Sister Tutor.

1936 STATE EXAMINATIONS.

Finals.

Entered	21	Passed	11	Failed	*10
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Preliminaries.

Entered	19	Passed	18	Failed	1
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} 74%

(* of 10 failures in Final, 8 passed at second attempt in February, 1937).

TABLE XI.

Table showing the classification of the accommodation for Sick, Maternity and Mental cases and the number of beds occupied on the 31st December, 1936.

Classification of Wards (1)	Number of Wards (2)	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro- vided (3)	Occu- pied (4)	Pro- vided (5)	Occu- pied (6)	Pro- vided (7)	Occu- pied (8)	Pro- vided (9)	Occu- pied (10)
Receiving Ward	1	—	—	—	—	—	—	5	—
1. Medical	2	49	46	49	49	—	—	98	95
2. Surgical	2	49	34	49	47	—	—	98	81
3. Chronic Sick	4	65	34	78	76	—	—	143	110
4. Children	2	—	—	—	—	119	119	119	119
5. Venereal	1	6	—	—	—	—	—	6	—
6. Tuberculosis	2	34	28	34	33	2	2	70	63
7. Isolation	—	—	—	—	—	—	—	—	—
8. Maternity	3	—	—	70	36	—	—	70	36
9. Mental Lunacy Act, 1890	} 5	24	23	56	51	—	—	80	74
(i) Short stay		49	27	110	103	36	27	195	177
(ii) Long stay	Part of 2 Wards	36	36	32	32	—	—	68	68
10. Mental Defectives	2	49	43	49	40	—	—	98	83
11. Skin and Cancer									
TOTAL	24	361	291	527	467	157	148	1050	906

TABLE XII.

Statistics relating to In-Patients during the year 1936, compared with 1935

						Year 1935	Year 1936
1.	Total number of admissions (including infants born in hospital)	....	....	....	....	5282	5407
2.	Number of women confined in Hospital	....	....			614	756
3.	Number of Live Births	....	....	....	....	593	715
4.	Number of Still-births	....	....	....	....	28	41
5.	Number of Deaths among the newly-born (<i>i.e.</i> under four weeks of age)*	....	....	....	....	30	28
6.	Total number of Deaths among children under one year (including those given under 5)	....	....			51	48
7.	Number of Maternal deaths among women confined in Hospital	....	....	....	....	2	6
8.	Total number of Deaths	....	....	....	....	851	788
9.	Total number of Discharges (including infants born in Hospital)	....	....	....	....	4437	4607
10.	Duration of stay of Patients included in 8 and 9 above. Number of cases whose total stay was for the following periods—						
	(a) Under four weeks	....	....	....	....	3336	2896
	(b) Four weeks, but under thirteen weeks				....	861	990
	(c) Thirteen weeks or more		....	....	....	1091	1509
11.	Number of beds occupied—						
	(a) Average during the year	....	....	....		884	937
	(b) Highest on { 20th April, 1935	....	....	....		960	
	{ 1st April, 1936	....	....	....			995
	(c) Lowest on { 25th December, 1935	....	....		854		
	{ 1st January, 1936	....	....				891
12.	Number of Surgical operations under general anaesthetic (excluding dental operations)	....				1015	1061
13.	Number of abdominal sections	....	....	....		156	233

* This figure relates only to children born in Hospital

TABLE XIII.

Classification of In-patients who were discharged from or who died in the Hospital during the Year ended 31st December, 1936.

DISEASE GROUPS						Children (under 16 years of age)		Men and Women	
						Dis- charged	Died	Dis- charged	Died
1.	Acute infectious disease	....	....	....	....	45	7	19	12
2.	Influenza	....	....	....	....	—	—	14	—
3.	Tuberculosis—								
	Pulmonary	....	....	....	....	18	2	84	53
	Non-pulmonary	....	....	....	....	11	4	18	6
4.	Malignant disease	....	....	....	....	—	—	65	112
5.	Rheumatism—								
	(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	....	....	....	....	28	—	10	—
	(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago and sciatica)	....	....	....	....	—	—	42	—
	(3) Chronic arthritis	....	....	....	....	—	—	20	—
6.	Venereal disease	....	....	....	....	5	—	46	10
7.	Puerperal pyrexia	....	....	....	....	—	—	25	1
8.	Puerperal fever	{ (a) Women confined in the hospital				—	—	—	—
		{ (b) Admitted from outside				—	—	10	—
9.	Other diseases and accidents connected with pregnancy and childbirth	....	....	....	....	—	—	80	5
10.	Mental diseases	{ (a) Senile Dementia				—	—	13	—
		{ (b) Other				11	—	103	—
11.	Senile decay	....	....	....	....	—	—	72	126
12.	Accidental Injury and Violence	....	....	....	....	18	—	88	50
<i>In respect of cases not included above :</i>									
13.	Disease of the Nervous System and Sense Organs					49	7	162	36
14.	„ „ Respiratory System	....	....	....	....	93	11	215	47
15.	„ „ Circulatory System	....	....	....	....	23	7	227	119
16.	„ „ Digestive System	....	....	....	....	62	8	201	22
17.	„ „ Genito-urinary System	....	....	....	....	38	—	123	41
18.	„ „ Skin	....	....	....	....	81	—	118	—
19.	Other diseases	....	....	....	....	42	21	167	1
20.	Mothers and infants discharged from Maternity Wards, and not included in above figures :								
	Mothers	....	....	....	....	—	—	906	—
	Infants	....	....	....	....	687	—	—	—
21.	Any persons not falling under any of the above headings	....	....	....	....	379	—	189	—
TOTALS						1590	67	3017	721

TABLE XIV.

Table shewing the Number of Sessions held by the part-time Visiting Medical Officers and the number of patients and attendances at the Out-patient Department and Ante-natal Clinic at Saint Mary's Hospital during the year, compared with 1935.

	1935	1936
Number of Sessions held by Visiting Medical Officers :		
Physician	65	108
Surgeon	72	77
Ear, Nose and Throat Specialist	124	147
Radiologist	153	149
Skin Specialist	50	100
Orthopaedic Surgeon	80	118
Obstetrician	—	160
Total	544	859
Number of Patients attending Out-patient Department	1317	4460
Number of Attendances at Out-patient Department	3861	12162
Number of Patients attending Ante-natal Clinic	1144	1591
Number of Attendances at Ante-natal Clinic	3604	6672

LABORATORY FACILITIES.—The following table gives particulars of various bacteriological examinations in connection with the diagnosis and prevention of infectious diseases carried out during the year.

DISEASE					Result				TOTAL	
					Positive		Negative			
					1936	1935	1936	1935	1936	1935
Diphtheria					751	992	4,166	5,340	4,916	6,332
Tuberculosis					646	440	1,328	1,147	1,974	1,587
Enteric Fever					6	16	24	64	30	80
Others					—	—	—	—	31	—
Totals					773	1,448	3,272	6,551	4,045	7,999

As stated in my last annual report, a small laboratory has been established at the Infectious Diseases Hospital for the examination of swabs from that institution. During the year 3,007 specimens were examined : 2,876 for diphtheria, of which 630 were positive. These figures are included in the above table.

In addition, the Pathologist made 19 (126) examinations of specimens submitted in connection with the investigation of cases of Puerperal Pyrexia and Puerperal Fever, 176 (32) examinations of specimens submitted from the Infectious Diseases Hospital, 353 (394) examinations of specimens submitted from Saint Mary's Hospital, and 59 examinations of specimens submitted from the Tuberculosis Dispensary, etc.

Bacteriological examinations in connection with the water supply and milks were also carried out by the City Analyst.

AMBULANCE FACILITIES.—The following ambulances are provided by the Local Authority, namely :—

- 1 Ambulance kept at the Milton Hospital for cases of infectious disease ;
- 2 Police ambulances at the Police Station for street accidents ;
- 5 Ambulances at the Ambulance Station, Saint Mary's Hospital, for general work.

Ambulances may be obtained at any time, day or night, on application to the Health Department, or to Saint Mary's Hospital.

PROFESSIONAL NURSING IN THE HOME.

The nurses of the Victoria Nursing Association, of whom there are 25 (19), attended on 2,764 (2,367) patients in their own homes; they paid altogether 84,544 (71,475) visits, these included 6,795 (6,102) visits to 404 (336) patients at the request of the Health Department (Maternity and Child Welfare Section) and 2,066 visits in respect of 43 tuberculous patients at the request of the Tuberculosis Officer and other medical men.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.—The powers and duties of the Mental Deficiency Act, are referred to the Mental Treatment Committee, and are administered by Dr. Thomas Beaton, O.B.E., the Superintendent of the City Mental Hospital, to whom I am indebted for the following particulars.

ACCOMMODATION.—Accommodation for the reception of mental defectives is provided at Saint Mary's Hospital, where a portion of that Hospital is approved by the Board of Control under Section 37 of the Mental Deficiency Act, 1913. All classes of defectives within the meaning of the Mental Deficiency Acts are received, provided the patients are over the age of 16 years, the number not to exceed 60 (29 males and 31 females).

On 1st January, 1937, there were 163 defectives actually resident in certified Institutions, chargeable to the Local Authority (63 males and 100 females). One male and four female defectives were absent from Institutions without leave, and 8 males and 14 females were on leave of absence on licence from Institutions. There were also 18 defectives from Portsmouth borne on the books of Rampton State Institution.

Plans for the provision of a Colony on Portsdown Hill for accommodating 500 mental defectives have now been approved by the Government Departments and the City Council, and it is hoped that in the very near future actual building operations will be commenced.

In addition to the above, there were on the 1st January, 1937, 101 mental defectives (34 males and 67 females) under guardianship, in respect of whom the Local Authority contribute towards the cost of their maintenance.

CARE AND TRAINING.—The number of mental defectives under Statutory Supervision on the 1st January, 1937, was 168 (88 males and 80 females) and the number under voluntary supervision was 711 (337 males and 374 females).

Considerable progress has been made in the development of the facilities for training suitable defectives by way of attendance at Occupation Centres. In past years classes have been held in four separate buildings in the City, viz. Rivers Street Institute, Cosham Institute, Highland Road Council School and Saint Mary's Hospital. The classes at Cosham Institute ceased at the end of October, 1935, and arrangements were then made for two whole-day sessions to be held at Rivers Street Centre. The introduction of these whole-day sessions proved to be a great success and clearly showed the advantages to be obtained by an all-day centre. Further possibilities in this direction were explored and as a result of arrangements made between the Mental Treatment Committee and the Public Assistance Committee, a portion of the building previously used as a Children's Home by the latter Committee was placed at the disposal of the Mental Treatment Committee for use as an Occupation Centre. This arrangement enabled the Mental Treatment Committee to create one central Occupation Centre, and the classes previously held at Rivers Street and Highland Road were closed down. The new Occupation Centre was opened at the beginning of October last and although it has only been in existence for a short period, remarkably good results have been obtained. The provision of a hot mid-day meal as an experiment for one month proved to be satisfactory and economical, and this arrangement is now being continued and is thoroughly enjoyed by the children. The Occupation Centre is situate in the grounds of Saint Mary's Hospital and this enables mentally defective children and young adults from that Hospital to attend the Classes at the Centre and therefore completes the scheme for the centralisation of training facilities for all defectives known to the Mental Treatment Department who are capable of receiving benefit from attendance at the Centre.

At the end of the year the total number of defectives on the Register at the Occupation Centre was 138.

The defectives living in their own homes are visited periodically by the staff of the Mental Treatment Department, and during the year 1936, 2,936 visits were made.

VACCINATION.—During 1935, the last year for which statistics are available, 3,860 births were registered, of whom 2,747, or 71.2% were successfully vaccinated; 20 cases were found to be insusceptible to vaccination and statutory exemptions were issued in respect of 785.

The following tables illustrates the growing tendency on the part of parents to neglect vaccination.

TABLE XV.
VACCINATION RETURNS FOR PAST THIRTY YEARS.

Year	No. of Births re- turned in birth sheets so regis- tered from 1st Jan. to 31st Dec.	Successfully Vaccinated	Insus- ceptible to Vaccin- ation	Had Small- pox	Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removed to Districts the Vacc. Officer of which has been appraised	Removed to places unknown	No. of these births remain- ing	No. in respect of which certificates of conscientious objections have been received
1907	5863	5069	20	...	495	40	63	25	2	149
1908	5998	5120	35	...	473	37	43	24	...	266
1909	5861	4938	46	...	430	40	33	26	2	346
1910	5809	4667	15	...	449	40	50	21	5	562
1911	5788	4376	57	...	510	41	43	42	6	713
1912	5658	4314	26	...	389	33	57	34	5	800
1913	5874	4321	35	...	409	44	48	27	12	978
1914	5749	4235	42	...	409	59	74	31	9	890
1915	4997	3785	29	...	288	47	50	18	11	769
1916	5208	3875	31	...	321	39	56	29	9	848
1917	4613	3405	13	...	256	32	54	37	6	810
1918	4810	3459	38	...	263	38	118	30	5	859
1919	5195	3752	13	...	302	26	76	38	4	984
1920	6600	4790	38	...	303	30	116	29	5	1289
1921	5662	4083	18	...	265	32	82	26	4	1152
1922	5528	4105	11	...	269	23	61	18	2	1039
1923	5327	4243	28	...	239	40	86	15	2	674
1924	5089	4004	21	...	243	26	45	16	3	731
1925	4884	3772	15	...	223	24	54	14	2	780
1926	4637	3673	42	...	185	26	53	14	2	642
1927	4353	3418	35	...	157	28	48	16	3	648
1928	4579	3541	38	...	194	27	63	20	5	691
1929	4518	3395	86	...	222	33	52	20	2	708
1930	4407	3232	28	...	174	29	70	35	12	827
1931	4454	3152	36	...	185	87	72	65	76	781
1932	4174	2872	22	...	202	133	74	51	20	799
1933	4000	2759	16	...	164	133	46	44	22	816
1934	4042	2813	16	...	132	130	60	46	21	824
1935	3860	2747	20	...	149	50	39	53	17	785
*1936 (to June)	2169	1546	23	...	91	51	19	29	5	405

*6 months only.

TABLE XVI.
VACCINATION RETURNS—1st January to 30th June, 1936.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births returned in the Birth List Sheets as registered from 1st January to 30th June, 1936	Number of these Births duly entered by 31st Jan., 1935 in Columns 1, 2, 4 and 5, of the Vaccination Register Birth List Sheets, viz. :				Number of these Births which on 31st January, 1937, remained unentered in the Vaccination Register on account (as shown by Report Book) of				Number of these Births remaining on 31st January, 1937, neither duly entered in the Vaccination Register (columns 3, 4, 5, 6 & 7 of this Return) nor temporarily accounted for in the Report Book (columns 8, 9 and 10 of this Return).
		Col. 1 Success- fully Vaccin- ated	Col. 2 Insuscep- tible of Vaccin- ation	Col. 2 Had Small- Pox	Col. 4 Number in respect of whom Certifi- cates of Con- scientious Objection have been received	Col. 5 Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removal to Districts the Vaccination Officer of which has been duly apprised	Removal to places un- known, or which cannot be reached ; and cases not having been found	
1	2	3	4	5	6	7	8	9	10	11
1. North End and Buckland	626	452	5	....	133	15	8	5	6	2
2. Kingston and East Southsea	567	392	7	....	98	28	21	12	6	3
3. Portsea and Landport	372	266	2	....	70	23	4	—	7	....
4. Portsmouth and Mid-Southsea	604	436	9	....	104	25	18	2	10	....
Totals	2169	1546	23	....	405	91	51	19	29	5
VACCINATION OF CHILDREN whose Births were registered in this District from Jan. 1st to Dec. 31st, 1935, inclusive.										
1. North End and Buckland	1207	841	4	....	261	42	16	17	20	6
2. Kingston and East Southsea	948	649	10	....	202	45	18	7	9	8
3. Portsea and Landport	656	491	3	....	102	32	6	5	16	1
4. Portsmouth and Mid-Southsea	1049	766	3	....	220	30	10	10	8	2
Totals	3860	2747	20	....	785	149	50	39	53	17

**PREVALENCE OF, AND CONTROL
OVER, INFECTIOUS AND OTHER
DISEASES**

(Figures for the previous year are included
in brackets for comparative purposes).

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

During the year under review 1,557 cases of infectious disease were notified, as compared with 1,595 during 1935. The outstanding features were :—

- (a) the marked decrease in the number of cases of diphtheria and the low mortality rate.
- (b) the lowest death rate on record (0.17 per 1,000 living) from the Seven Principal Zymotic Diseases—Diphtheria, Scarlet Fever, Measles, Small-pox, Typhoid Fever, Whooping Cough and Diarrhoea.

SCARLET FEVER.—The number of cases of scarlet fever notified was 701, which is 84 more than last year (617) and just less than the average number per year (765) for the past twelve years. Of these 636, or 89.5% were admitted to hospital. Table XVII gives the number of notifications of Scarlet Fever and other two streptococcal infections, *i.e.* Erysipelas and Puerperal Sepsis, for the past thirteen years. The general correspondence in the incidence of these three diseases is evident.

There were only 2 deaths due to scarlet fever, giving a case mortality rate of 0.28%.

SCARLET FEVER “ RETURN ” RATE.—During the year there were 27 “ return ” cases of scarlet fever, giving a “ return ” case rate of 4.47% compared with 4.80% during 1935. This is a marked improvement on previous years. A “ return ” case is defined as a case of scarlet fever occurring in the same house not less than 24 hours and not more than 28 days from the return of the original case from hospital.

TABLE XVII.

Comparison of the Number of Cases notified as suffering from Scarlet Fever, Erysipelas and Puerperal Sepsis during each of the years 1925-1936.

YEAR	Number of Notifications received in respect of Cases of		
	Scarlet Fever	Erysipelas	Puerperal Sepsis
1925	984	61	5
1926	549	50	8
1927	593	61	8
1928	776	77	25
1929	787	74	24
1930	689	76	15
1931	601	72	8
1932	669	70	10
1933	864	74	13
1934	1349	104	17
1935	617	72	18
1936	701	61	9

DIPHTHERIA.—During the year 244 cases were notified, compared with 422 cases in 1935. Of these, 240, or 98.3%, were removed to hospital.

There were 8 (39) deaths from the disease giving a case mortality rate of only 3.27% (9.24%). This welcome reduction is partly attributable to a less toxic type of the disease and to the administration of massive doses of anti-toxin intravenously and/or intramuscularly at the Hospital.

OUTBREAKS.—There were no epidemics of note in the City.

DIPHTHERIA IMMUNISATION.—Despite the fact that during the year there was a Health Week and that energetic measures were adopted to acquaint the populace with the benefits of immunisation against diphtheria, the response has been disappointing.

As to the efficacy of immunisation there can be no doubt. Active immunisation against diphtheria has been practised in this country and in America since the War and has definitely passed the experimental stage. Parents can be assured that their children, if successfully immunised and post Schick tested, will not contract the disease under normal circumstances even though exposed to it.

Active immunisation is the only reliable safeguard against the severe type of diphtheria which is prevalent in this country. Whereas in the ordinary form of diphtheria early administration of anti-toxin to the patient can be relied upon to neutralise the poison, in the graver type anti-toxin fails to give the same favourable results. The wise parent, therefore, will not hesitate to do his duty to his child and will follow the example of the doctors themselves who take good care to see that their own children are immunised. The foolish parent, however, will wait until his child contracts the disease and will then experience the remorse of knowing that but for his parental neglect the serious illness of his child, followed perhaps by complications and even death, could easily have been prevented—not to speak of the needless expense which his indifference has caused his fellow-ratepayers in maintaining his child in hospital (approximately £25).

A comprehensive Scheme for the diphtheria immunisation of children in the City was approved by the Health Committee and launched in 1935. The co-operation of Medical Practitioners in the City was obtained, and immunising and testing material forwarded to them free on request. Leaflets (a copy of which was reproduced in my last Annual Report) were widely distributed requesting parents to visit their own doctor, or if unable to afford a doctor to apply to the Health Department.

During the year 1,459 c.c.'s of immunising material (*i.e.* two injections each of 1 c.c. of Toxoid Antitoxin Floccules T.A.F. per case) were issued to Medical Practitioners, together with 20 c.c.'s of Schick test material, and in addition 480 children were Post-Schick tested by the Department's Medical Officers at the request of Medical Practitioners. The results were as follows :—

Schick positive .....	.....	50 (10.41%)
Schick negative .....	.....	430 (89.59%)
		<hr/>
Total .....	.....	480
		<hr/>

It has now been decided to issue 3 x 1 c.c.'s of T.A.F. instead of 2 x 1 c.c. doses, and it is anticipated that the third injection will increase the percentage of children rendered immune to about 95. The 50 children who were found to be still Schick positive were given further injections until rendered Schick negative.

The immunisation work carried out by the Medical Officers of the Health Department during the year was as follows :—

CHILDREN INNOCULATED DURING 1936.

Infectious Diseases Hospital :

Immunised 520 ; Schick tested 461

School Clinic :

Immunised 157 ; Schick tested 147

Total 677

Total 608

In immunising the 520 children at the Infectious Diseases Hospital, Alum Precipitated Toxoid or A.P.T. (two injections each of 1 c.c. or "two shot" method) was used as an experiment in 207 cases, and Toxoid Antitoxin Floccules or T.A.F. (two injections each of 1 c.c.) was used in 313 cases. The results were as follows :—

A.P.T. :

Schick negative	.....	156
Schick positive	.....	3
Not tested	.....	48

Total 207

i.e. 98% of those tested after immunisation with A.P.T. by the "two shot" method became Schick negative.

T.A.F. :

Schick negative	.....	255
Schick positive	.....	27
Not tested	.....	31

Total 313

i.e. 90.5% of those tested after immunisation with T.A.F. using two injections only of 1 c.c. became Schick negative.

The numbers are small, but even so they indicate quite clearly the superiority of the "two shot" A.P.T. method over the two 1 c.c. T.A.F. method, thus suggesting that when

T.A.F. is used, three injections (1 c.c., 1 c.c. and 1.5 c.c.) be given. A.P.T. is ideal and very efficient for children under six years of age. T.A.F. should be used for older children.

During the year no child who was fully immunised contracted diphtheria.

MEASLES.—As measles is not notifiable, the number of cases occurring in the City during the year is not known. The number of deaths was 14, which is more than double those from scarlet fever and diphtheria combined. Measles is undoubtedly one of the chief killing diseases in childhood.

PREVENTION OF MEASLES.

The prevention or attenuation of measles by the injection of the blood serum of persons who have suffered from the disease has now passed the experimental stage and the results achieved indicate that the method is of real value. Accordingly, the Health Committee invited, and readily obtained, the co-operation of Medical Practitioners in the City in a Scheme for the collection and distribution of measles serum. The following is a summary of the Scheme, which was put into operation towards the end of the year under review :—

COLLECTION OF BLOOD.—Medical Practitioners are asked to forward to the Medical Officer of Health the names and addresses of suitable volunteers from among their adult patients who have either :

- (a) suffered from a definite attack of measles within a few weeks ; or
- (b) had an undoubted attack of measles at some previous date.

The donors are sent for when required and bleeding is carried out at Saint Mary's Hospital or at the Royal Portsmouth Hospital. The blood is sent to the laboratories of Messrs. Burroughs, Wellcome & Co., London, who undertake to draw off the serum, test it (Wasserman, sterility and atoxicity) and bottle the convalescent serum from group (a) above, in 5 c.c. phials, and the adult serum from group (b) in 10 c.c. phials. The donors are paid a fee of 5/- to cover incidental and travelling expenses.

DISTRIBUTION OF SERUM.—A supply of serum is stored at the Infectious Diseases Hospital, and is available for use by Medical Practitioners on application to the Medical Officer of Health. There is no charge, but patients who can afford to do so are invited to make a voluntary contribution. As it is

necessary for investigation purposes, to ascertain the effect of the serum on the patients, Medical Practitioners are asked to supply a few particulars on cards which are issued with the serum.

USE OF THE SERUM.—As the serum will not be available in large quantities it cannot be used to prevent epidemics, but it has a definite use in preventing or attenuating the disease in patients exposed to infection :—

- (a) children under three years of age, unless their physical condition is very good ;
- (b) patients suffering from intercurrent disease ;
- (c) patients who are weakly or debilitated ; and
- (d) cases in respect of whom avoidance of infection is essential for special domestic reasons.

By means of the serum the doctor can entirely prevent an attack of disease in those exposed to the infection, the protection lasting for a few weeks, after which the patient becomes susceptible ; or, if he considers it advisable, he can arrange for the patient to have only a modified attack, which usually occurs without complications, and protection remains high for at least many months and probably for years.

ERYSIPELAS.—During the year 61 cases were notified and of these 4 proved fatal.

ENTERIC FEVER.—There were 11 cases notified during the year, of which 4 proved not to be suffering from the disease. Investigation failed to reveal a common source of infection.

PUERPERAL FEVER AND PYREXIA.—There were 9 of the former and 48 of the latter notified during the year. These conditions are dealt with more fully in the Maternity and Child Welfare section of the report.

PNEUMONIA—Acute Influenzal and Acute Primary.—During the year 47 cases were notified. The total deaths from this disease, certified as such, during the year was 137, giving a mortality rate of 0.55 per 1,000. The corresponding figures for 1935 were 155, giving a rate of 0.61 per 1,000.

MALARIA.—Three cases of malaria were notified. The source of infection in each case was outside the country.

Other infectious diseases notified during the year may be found on page 50.

The following cases of infectious diseases were notified during the year :—

Disease					Cases Notified*	Admitted to Hospital	Total Deaths
Diphtheria	....	....	....	....	244	240	8
Scarlet Fever	....	....	....	....	701	636	2
Enteric Fever	....	....	....	....	11	10	2
Puerperal Fever	....	....	....	....	9	9	3
Puerperal Pyrexia	....	....	....	....	48	33	—
Acute Primary and Influenzal Pneumonia					47	4	33
Cerebro-spinal Meningitis			....	....	3	3	—
Encephalitis Lethargica			....	....	—	—	4
Erysipelas	....	....	....	....	61	24	4
Malaria	....	....	....	....	3	1	—
Dysentery	....	....	....	....	1	1	—
Undulant Fever	....	....	....	....	1	1	—
Ophthalmia Neonatorum			....	....	21	9	—
Tuberculosis	....	....	....	....	407	366	204

* *An analysis of these cases into age groups is given in Table XXI.*

OPHTHALMIA NEONATORUM.—The following particulars are given with regard to the 21 cases of ophthalmia neonatorum (inflammation in the eyes of new-born babies) at one time one of the most frequent causes of permanent blindness :

Cases Notified	Treated		Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
	At Home	In Hospital				
21	12	9	20	Nil	1	Nil

TABLE XVIII.

Table showing the Numbers and Death-rates per 1,000 of Population from the Seven Principal Zymotic Diseases, from Lung Diseases (excluding Phthisis), from Phthisis, and from all causes, during each Quarter and for the whole year 1936.

Quarter ending	The Seven Principal Zymotic Diseases * All ages		Lung Diseases (excepting Phthisis) †		Phthisis		From all Causes	
	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000
1936								
March 31st	10	0.16	93	1.48	46	0.73	831	13.22
June 30th	14	0.22	53	0.84	38	0.60	765	12.17
September 30th	8	0.13	63	1.00	33	0.53	606	9.65
December 31st	12	0.15	30	0.48	54	0.86	769	12.23
Totals	44	0.17	239	0.95	171	0.68	2971	11.81

* Includes Small-pox, Measles, Scarlet Fever, Whooping Cough, Diphtheria, Enteric or Typhoid Fever and Diarrhoea.

† Includes Laryngitis, Emphysema, Asthma, Bronchitis, Pneumonia, Pleurisy, and other Diseases of the Respiratory System.

TABLE XIX.

Showing the number of Deaths in the years 1861 to 1936 from the Seven Principal Zymotic Diseases.

Year	Popula- tion	DISEASES							TOTALS	
		Small- pox	Measles	Scarlet Fever	Diph- theria	Whoop'g Cough	Fever	Diarr- hoea	Numbers	Rate per 1000 living
1861	95220	1	3	5	6	11	111	152	289	3.06
1862	96960	....	42	225	20	36	128	71	522	5.39
1863	98731	12	80	134	24	16	37	68	391	3.96
1864	100531	228	6	17	17	48	72	118	506	4.95
1865	102363	3	14	20	7	50	74	122	290	3.09
1866	104230	1	16	34	26	46	85	117	325	3.16
1867	106130	....	82	15	4	23	74	140	338	3.18
1868	108064	....	46	107	18	57	119	117	464	4.86
1869	110034	1	57	295	18	26	105	100	602	5.47
1870	112040	1	39	119	13	46	91	121	430	3.83
1871	114083	39	42	30	10	66	72	100	359	3.28
1872	114970	514	52	5	21	17	112	113	834	7.25
1873	116380	45	16	12	15	19	97	106	310	2.66
1874	117810	2	56	36	19	104	101	149	467	3.90
1875	119260	....	54	47	18	8	103	141	371	3.11
1876	120730	1	109	457	11	42	71	131	822	6.80
1877	122210	....	12	36	5	59	87	153	352	2.63
1878	123710	....	36	16	1	92	96	170	411	3.32
1879	125250	....	10	11	4	9	62	73	169	1.35
1880	126830	....	42	9	20	48	70	192	381	3.00
1881	128691	....	7	25	205	66	60	73	436	3.38
1882	131535	....	156	40	106	36	107	111	556	4.22
1883	134441	1	10	16	20	54	93	80	274	2.03
1884	137412	....	164	9	41	9	58	116	397	2.88
1885	140448	....	7	5	42	44	93	123	314	2.23
1886	143552	1	197	18	65	102	124	191	698	4.86
1887	146724	3	8	26	47	41	53	151	329	2.34
1888	149966	....	50	12	17	27	27	98	231	1.53
1889	153279	2	8	11	33	92	32	122	300	1.95
1890	156667	....	4	19	47	39	50	105	264	1.69
1891	160167	....	223	9	23	38	33	73	399	2.49
1882	163628	....	38	18	26	87	42	99	310	1.89
1893	165153	....	120	32	29	36	54	247	518	3.13
1894	167878	4	139	14	34	41	29	93	554	3.18
1895	170672	....	39	7	18	64	37	238	403	2.36
1896	173565	....	126	19	20	60	28	157	410	2.36
1897	176497	....	35	11	22	65	44	286	463	2.62
1898	179500	....	73	31	54	42	44	183	427	2.38
1899	182576	....	50	22	120	62	75	316	645	3.35
1900	185725	....	3	11	104	87	93	159	457	2.46
1901	188885	....	82	15	70	21	43	311	542	2.87
1902	193969	....	70	14	62	92	54	159	451	2.32
1903	198049	....	17	27	75	34	23	115	291	1.46
1904	202171	....	1	22	71	76	34	213	417	2.06
1905	206336	....	218	11	69	45	18	173	534	2.58
1906	210546	....	8	3	60	63	17	226	377	1.79
1907	214797	....	169	4	61	57	30	60	381	1.77
1908	219095	....	14	8	49	55	26	48	200	0.91
1909	223436	....	104	19	66	27	33	54	303	1.35
1910	227821	....	64	30	56	52	39	54	295	1.29
1911	232221	....	28	21	72	40	26	290	477	2.05
1912	236732	....	95	29	124	52	22	57	379	1.60
1913	241256	....	25	20	87	16	23	112	283	1.17
1914	245827	....	39	5	79	50	29	71	273	1.11
1915	*202141	....	123	17	68	36	18	52	314	1.55
1916	*197843	....	15	3	52	46	10	65	191	0.96
1917	*198527	....	44	7	40	36	4	48	179	0.90
1918	*203396	....	52	4	48	43	5	40	192	0.94
1919	*224846	....	14	2	42	20	....	37	115	0.51
1920	*233805	....	32	3	40	41	1	22	139	0.59
1921	*233929	....	23	13	30	21	3	87	177	0.75
1922	*236630	....	12	12	48	42	3	32	149	0.61
1923	*230718	....	39	5	46	9	11	31	141	0.61
1924	*232000	....	16	8	18	38	4	21	105	0.44
1925	*232900	....	20	6	43	30	5	19	123	0.52
1926	*231500	....	11	7	66	17	3	36	140	0.60
1927	*232100	....	40	3	47	18	....	15	123	0.52
1928	*240700	....	9	3	53	12	2	22	101	0.41
1929	*242000	....	1	7	24	19	2	67	120	0.49
1930	*242000	....	101	9	16	6	1	40	173	0.71
1931	*228900	....	1	12	12	21	3	24	73	0.31
1932	253100	....	48	5	2	6	....	30	91	0.36
1933	251200	....	4	10	9	17	....	19	59	0.23
1934	248900	....	28	10	29	7	1	12	87	0.34
1935	250200	....	....	6	29	9	1	16	71	0.28
1936	251400	....	14	2	8	1	2	17	44	0.17

* Civil population only.

TABLE XX.

WEEKLY RETURN of cases of Infectious Disease.

Week ending 1936	Small-pox	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Puerperal Pyrexia	Cerebro-spinal Fever	Erysipelas	Ophthalmia Neonatorum	Malaria	Dysentery	Undulant Fever	Tuberculosis		Total
														Pul- monary	Non- Pul- monary	
Jan. 4	...	15	5	...	3	...	2	...	1	...	...	...	...	1	1	28
" 11	...	10	9	...	2	2	2	...	2	1	...	...	...	6	1	35
" 18	...	15	1	...	3	...	3	...	2	...	...	...	...	22	...	46
" 25	...	17	18	1	3	...	...	...	2	1	...	...	...	16	...	58
Feb. 1	...	15	3	...	1	...	...	...	1	1	1	...	...	2	...	24
" 8	...	5	7	...	1	2	2	...	3	1	...	...	...	10	1	32
" 15	...	8	2	...	1	...	...	...	2	...	...	...	...	9	...	22
" 22	...	12	2	...	2	...	2	...	1	...	...	...	...	11	...	30
" 29	...	14	2	...	2	...	1	...	3	...	...	...	...	8	2	32
Mar. 7	...	16	7	...	1	...	1	...	...	1	...	...	...	6	3	35
" 14	...	20	6	...	...	1	1	...	2	1	...	...	...	12	1	44
" 21	...	18	2	...	...	...	1	...	3	...	...	...	...	1	4	29
" 28	...	12	2	...	...	...	...	...	4	...	...	...	...	7	3	28
April 4	...	14	2	...	1	...	...	...	1	1	...	...	...	9	1	29
" 11	...	21	2	1	2	...	...	...	...	2	...	...	...	6	...	34
" 18	...	10	1	...	1	...	1	...	1	...	...	...	...	3	2	19
" 25	...	15	...	1	1	...	1	...	2	1	...	...	...	4	2	27
May 2	...	21	6	...	1	...	3	...	...	...	...	...	...	2	...	33
" 9	...	12	3	...	2	...	...	...	1	...	...	...	...	9	1	28
" 16	...	11	3	...	2	...	1	...	1	...	...	...	...	3	...	21
" 23	...	9	6	...	1	...	3	...	2	1	...	...	...	5	1	28
" 30	...	22	5	...	1	...	1	...	3	1	...	...	...	6	...	39
June 6	...	11	6	...	...	...	...	...	...	1	...	...	...	3	...	21
" 13	...	14	3	...	...	...	4	1	...	2	...	...	...	3	2	29
" 20	...	17	5	...	...	...	...	...	2	...	...	...	...	2	1	27
" 27	...	10	8	...	1	...	...	1	1	...	...	...	...	6	3	30
July 4	...	9	4	...	...	...	1	...	...	...	...	...	...	5	...	19
" 11	...	12	2	...	...	...	...	...	1	...	...	...	...	9	2	26
" 18	...	18	6	...	2	...	3	...	1	...	...	...	...	5	1	36
" 25	...	14	2	1	...	...	2	1	...	...	...	...	...	2	1	23
Aug. 1	...	16	2	...	1	1	...	...	...	...	...	...	...	11	1	32
" 8	...	19	3	...	3	1	1	...	1	1	...	...	...	5	1	35
" 15	...	9	5	...	...	...	...	...	...	1	...	...	...	5	...	20
" 22	...	6	3	...	...	...	...	...	...	2	...	...	...	9	1	21
" 29	...	11	1	1	...	...	2	...	2	...	...	...	...	7	...	24
Sept. 5	...	8	1	...	...	...	...	...	...	...	...	...	...	4	...	13
" 12	...	13	6	1	...	...	...	...	...	...	...	...	...	3	...	23
" 19	...	12	2	1	...	...	1	...	3	...	...	1	...	6	3	29
" 26	...	13	5	...	...	...	3	...	1	...	...	...	...	6	...	28
Oct. 3	...	14	4	2	...	...	...	...	1	...	...	...	...	8	...	29
" 10	...	23	5	1	...	...	...	...	2	...	...	...	...	15	1	47
" 17	...	17	12	1	1	...	...	...	1	...	...	...	...	14	1	47
" 24	...	10	8	...	...	...	...	...	1	1	...	...	...	9	1	30
" 31	...	19	6	...	1	...	2	...	...	1	...	...	...	5	1	35
Nov. 7	...	14	5	...	...	1	1	...	1	...	2	...	...	4	...	28
" 14	...	6	6	...	3	...	...	...	...	...	...	...	...	...	...	15
" 21	...	12	5	...	1	...	1	...	3	...	...	...	...	4	1	27
" 28	...	9	1	...	...	...	1	...	2	...	...	...	...	11	...	24
Dec. 5	...	12	12	...	1	...	...	...	1	...	...	...	...	9	1	36
" 12	...	11	6	...	...	...	...	...	...	...	...	...	...	6	...	23
" 19	...	9	9	...	...	1	...	...	...	...	...	...	1	9	4	33
" 26	...	9	5	...	1	...	1	...	...	...	...	...	...	3	...	19
Jan. 2	...	12	2	...	1	...	...	...	...	...	...	...	...	9	3	27
TOTALS	...	701	244	11	47	9	48	3	61	21	3	1	1	355	52	1557

TABLE XXI—Cases of Infectious Diseases notified during the Year 1936.

REPORT OF THE MEDICAL OFFICER OF HEALTH

Notifiable Disease	CASES NOTIFIED IN WHOLE DISTRICT													TOTAL CASES NOTIFIED IN EACH WARD.															
	At Ages—Years													St. Thomas 1	Portsea 2	Nelson 3	North End 4	Buckland 5	Kingston 6	Highland 7	St. Simon 8	Havelock 9	St. Paul 10	Guildhall 11	Fratton 12	St. Mary 13	Charles Dickens 14	Cosham 15	Meredith 16
	At all Ages	Un- der 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over																
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria (including Mem- branous Group)	244	1	14	12	16	25	98	38	13	19	4	4	—	5	11	33	11	5	5	23	16	11	11	6	60	11	—	—	
Erysipelas	61	—	—	1	1	—	—	2	2	13	12	25	5	6	7	9	5	3	1	—	1	4	2	1	8	8	—	—	
Scarlet Fever	701	2	18	45	36	65	370	84	20	49	11	—	1	37	67	61	34	47	33	36	51	50	59	54	30	47	—	—	
Enteric Fever	11	—	—	—	1	1	—	—	2	2	3	2	—	—	2	—	1	1	1	2	—	—	—	1	—	—	—	—	
Influenzal Pneumonia ..	47	—	—	—	1	2	3	3	2	7	9	13	7	1	—	25	—	2	1	3	1	1	3	3	2	1	—	—	
Puerperal Fever	9	—	—	—	—	—	—	—	—	7	2	—	—	—	—	2	—	1	2	—	—	1	—	—	—	2	—	—	
Puerperal Pyrexia	48	—	—	—	—	—	—	—	10	29	9	—	—	10	2	13	2	—	1	1	2	—	3	—	6	4	—	—	
Ophthalmia Neonatorum ..	21	21	—	—	—	—	—	—	—	—	—	—	—	6	—	4	—	1	—	—	—	—	1	2	1	3	—	—	
Cerebro-spinal Meningitis	3	1	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	1	—	—	
Malaria	3	—	—	—	—	—	—	—	—	—	1	2	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	
Dysentery	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	
Undulant Fever	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	
Pulmonary Tuberculosis	355	—	—	—	—	—	9	7	36	143	65	82	13	30	26	38	17	20	16	25	17	15	27	22	21	20	—	—	
Other forms of Tuberculosis	52	—	1	1	1	1	12	10	10	10	4	2	—	5	4	3	1	2	—	3	2	3	3	4	3	4	—	—	
TOTALS	1557	25	33	59	57	94	492	145	95	280	120	131	26	100	120	190	71	83	61	93	91	85	109	94	131	101	—	—	

Isolation Hospitals or Sanatoria—1. Milton Hospital for Infectious Diseases and Tuberculosis.
 2. Small-pox Hospital at Elson (by arrangement with Gosport and Alverstoke U.D.C.)
 3. The Langstone Sanatorium and Saint Mary's Hospital for Tuberculosis.

INFECTIOUS DISEASES' HOSPITAL.

It was fortunate that there was no increase in the number of admissions to the Infectious Diseases Hospital during the year—otherwise the extensive repair and renovation work and the modernisation of the heating system would not have been possible. The unavoidable disorganisation and discomfort caused thereby were borne cheerfully by all members of the Staff.

The year under review is noteworthy as being the first year in which the following new developments came into operation :—

- (1) Establishment of a Nurses' Training School for the Certificate of Fever Nursing.
- (2) Establishment of a Hospital Bacteriological Laboratory.
- (3) Inauguration of a new system of Dispensing and of Record Keeping consequent on the appointment of a Clerk Dispenser.
- (4) Admission of cases from outside authorities, *e.g.* Urban District of Havant and Waterlooville, in accordance with the Local Government Act of 1929, one of the main objects of which is to concentrate hospital treatment, and particularly specialised treatment, in large centres of population where better and more up-to-date facilities can be provided. The Urban District Council of Havant and Waterlooville decided to close their own Isolation Hospital, and under agreement with the Portsmouth City Council their cases are transferred to our Infectious Diseases Hospital at Milton. Twenty-two such cases were transferred from April 1st, 1936, when the Scheme came into operation, to December 31st, 1936.

All the above are described fully in my Report of last year. The results of the first year's working have been satisfactory as will be seen by the following Report of the Deputy Medical Superintendent.

There is difficulty in obtaining a sufficiency of nurses especially in the lower grades—a difficulty which is shared by many Infectious Diseases Hospitals at the present time. It is anticipated that the shortage will be remedied in course of time as trainees pass through the new Nurses' Training School.

The latest methods of treatment employed by the Medical Staff at the Hospital have contributed largely to a marked reduction in the number of deaths from scarlet fever and diphtheria, to a decrease in the number of complications and to a shortening of the period of stay in hospital.

REPORT ON THE WORK OF THE INFECTIOUS DISEASES HOSPITAL.

By IAN McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

(Deputy Medical Superintendent and Senior Assistant M.O.H.)

The total number of beds available for the treatment of infectious diseases in the Hospital is 206, of these the cubicle isolation block supplies 20, which is totally inadequate. Two new blocks are nearing completion—one a two-storey block of 64 beds (four wards of 14 and side wards), the other a cubicle ward block of 20 beds. It is hoped to have these wards in commission during the coming year.

Unfortunately, during the past year great difficulty has been experienced in obtaining nursing staff, and as a result the work has been carried out under very trying circumstances, many of the wards having to be under-staffed. Certain of the wards had to be closed in turn for repairs and on account of the installation of a new heating system, with consequent risk of overcrowding the other wards.

ADMISSIONS.—During the year 1,124 cases were admitted excluding tuberculosis, which accounted for 63 admissions. The following table gives in detail the admissions month by month.

The grand total of all cases admitted during the year was 1,187, or 17 less than in 1935.

TABLE XXII. CASES ADMITTED DURING 1936.

Month	Scarlet Fever	Diphtheria	Enteric Fever	Erysipelas	Varicella	Puerperal Sepsis	Tonsillitis	Measles	Septic Parotitis	Meningitis	Observation	Adenitis	Diarrhoea	Mumps	BronchoPneumonia	Pertussis	Measles + Pertussis	Laryngitis	Dysentery	Stomatitis	Typhys	Malta Fever	Patellar Bursitis	Otitis Media
January	61	33	1	5	4	2	4	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
February	38	13	—	4	1	—	1	2	—	1	1	1	1	—	—	—	—	—	—	—	—	—	—	—
March	67	18	—	7	—	—	2	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
April	68	9	3	1	1	1	—	6	—	—	—	—	—	2	1	—	—	—	—	—	—	—	—	—
May	62	20	—	—	1	—	2	34	—	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—
June	46	23	—	1	—	—	2	53	—	1	—	—	—	2	1	1	1	—	—	—	—	—	—	—
July	51	19	1	1	—	—	1	17	—	1	—	—	—	2	—	—	—	1	1	—	—	—	—	—
August	47	14	—	3	—	—	1	2	—	—	—	—	—	2	—	—	1	—	—	—	1	—	—	—
September	50	17	7	—	—	—	2	—	—	—	—	—	—	4	—	—	—	—	1	—	—	1	—	—
October	69	34	1	1	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
November	38	20	—	2	1	—	2	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—
December	47	29	—	—	1	—	3	—	—	—	—	—	—	4	—	1	—	—	—	—	—	—	—	1
Totals	644	249	13	25	9	3	20	118	1	3	1	1	1	19	4	3	2	1	2	1	1	1	1	1
Cases from Outside Authorities	8	9	3	1	—	1	—	4	—	—	—	—	—	3	—	—	—	—	1	—	—	—	1	—
Nett Portsmouth Cases	636	240	10	24	9	2	20	114	1	3	1	1	1	16	4	3	2	1	1	1	1	—	1	—

In addition, 63 cases of Tuberculosis were admitted. Total admission 1187.

BACTERIOLOGICAL WORK.—The Laboratory was opened on January 1st, and much useful work has been done. It is hoped to extend its usefulness. Examinations are confined to diphtheria swabs and microscopic work in connection with pathological discharges.

A large amount of bacteriological work is sent to the Royal Portsmouth Hospital (Widals, faeces, urines, cerebro spinal fluids and throat swabs for haemolytic streptococci).

The following is a table of the work done.

K.L.B. Examinations	2876
Other Investigations	31
Total	<hr/> 2907 <hr/>
K.L.B. Negative	2246
K.L.B. Positive	630
Post Mortem Examinations	12

TRAINING SCHOOL.—The Lecture Room has provided a long needed want. Courses of instruction have been given by the Sister-Tutor and also by the resident Medical Officers on theoretical and practical nursing, anatomy, physiology and hygiene, to prepare nurses for the State Examinations in Fevers.

SPECIAL SERVICES.—The services of an Ear, Nose and Throat Surgeon are available when required, also those of a Consulting Surgeon and Consulting Physician.

A great increase in the work done by these Consultants and by the Resident Medical Staff has taken place, especially in the operative work, as the following table shows.

OPERATIONS, 1936.

Tonsils and Adenoids	56	Blood Transfusions	2
Lumbar Puncture	27	Myringotomy	20
Incision of Abscess	22	Aspiration of Chest	1
Single Mastoidectomy	12	Aspiration of Ankle	1
Double Mastoidectomy	5	Incision of Gland	1
Tracheotomy	3		
Appendicectomy	2	Total	<hr/> 152 <hr/>

DISPENSARY.—The new Dispensary was completed in the early part of the year. The Dispenser, besides her duties as such, is responsible for the keeping of case records (discharges from hospital, etc.), also for the clerical work in relation to the diphtheria immunisation clinic.

SCARLET FEVER.—Of the 644 cases admitted as Scarlet Fever during the year, the majority were of average severity. There were, however, several cases of toxic Scarlet Fever necessitating intravenous Scarlet Fever Serum and resulting in two deaths only, giving a death rate of 0.33 per 100 proved cases, which is much lower than the corresponding rate in 1935 (1.02%).

The following is a table showing the complications arising from 604 proved cases of Scarlet Fever discharged.

COMPLICATIONS OCCURRING IN 604 PROVEN
CASES OF SCARLET FEVER.

Adenitis	.....	82	Quinsy	.....	1
Ear Complications	.....	32	Cellulitis (Thigh)	.....	1
Otitis Media	4		Multiple Abscesses	.....	1
Otorrhoea	22		Pneumonia	.....	1
Mastoiditis	6		Arthritis	.....	1
Relapses	.....	22	Bronchitis	.....	1
Nephritis	.....	8	Laryngitis	.....	1
Carditis	.....	8	Late Albuminuria	.....	1
Rhinorrhoea	.....	5	Rheumatism	.....	1
Injection Abscess (Buttock)	.....	2	Total	.....	168

It will be seen that 82, or 48.8% of the complications were due to the enlargement of glands (mainly cervical), and that only in 3 cases was incision necessary. Ear complications accounted for 32, or 19.0% of the total.

There were 22, or 13.1% of relapse cases.

DIPHTHERIA.—There were 249 cases admitted. Of these 197 were discharged during the year “proved to be diphtheria.”

An analysis of these 197 cases is given on next page, together with the complications arising whilst in hospital.

COMPLICATIONS.

Type of Diphtheria	Total Cases	Palatal Paresis	Cardiac	Strabismus	Otorrhoea	Conjunctivitis	Abscess Buttock	Tracheotomy	Pharyngeal Paralysis	Relapse	Nephritis	Abscess of Neck	% of Complication
Faucial	105	1	10	—	6	1	1	—	—	1	1	—	20
Bacteriological : Throat	9	—	—	—	1	—	—	—	—	—	—	—	11.1
Nose	23	—	—	—	1	—	—	—	—	—	—	—	4.34
Ear	2	—	—	—	1	—	—	—	—	—	—	—	50
Nasal	15	—	—	—	—	—	—	—	—	—	—	—	—
Toxic Faucial	30	7	11	3	1	—	—	—	1	—	—	1	80
Laryngeal	5	—	—	—	—	—	—	2	—	—	—	—	40
Naso Pharyngeal	8	—	1	—	—	—	—	—	—	—	—	—	12.5

It will be seen from the above table the very high percentage of complications in the toxic faucial type of the disease is 80%. The average dose of diphtheria antitoxin given in each case of toxic faucial diphtheria was 250,000 units.

The 34 cases of bacteriological diphtheria were those in which the bacilli were found on microscopic examination of swabs—the patients themselves not exhibiting any clinical signs or symptoms. The treatment in the majority of these cases consisted in the removal of tonsils and adenoids.

ENTERIC FEVER.—During the year there were 10 cases admitted as Typhoid Fever and 3 as Paratyphoid Fever.

DEATHS.—During the year there were 26 deaths from the causes stated below.

Diphtheria	7	Nephritis+Uraemia	1
Broncho-Pneumonia	5	Peritonitis	1
Erysipelas	2	Tonsillitis	1
Scarlet Fever	2	Typhoid Fever	1
Measles	2	Whooping Cough	1
Measles+Mastoid	1		
Cellulitis	1	Total	26
Enteritis	1		

Special comment is called for in regard to the deaths due to diphtheria (all forms) namely 7, giving a case mortality rate of only 3.55%, as compared with 9.24% in the previous year. This remarkable reduction in the death rate due to diphtheria, justifies the use of massive injections of diphtheria antitoxin given to late and toxic cases. Intravenous medication was used in practically every case.

DISCHARGES.—During the year there were 1,124 patients discharged from the Infectious Diseases Section, as follows :—

	Scarlet Fever	Diph- theria	Other Infectious	Non- Infectious	Deaths	Total
January	39	25	13	11	3	92
February	51	35	5	17	3	97
March	39	19	5	5	4	86
April	55	17	12	6	2	92
May	68	15	17	15	—	115
June	63	9	54	6	5	127
July	46	13	34	10	5	108
August	54	13	14	6	—	87
September	49	21	11	6	1	94
October	43	7	7	7	—	94
November	51	12	7	8	2	70
December	46	21	7	14	1	90
Total	604	197	186	111	26	1124
Cases from Out- side Authorities	9	6	9	8	—	32
Nett Portsmouth Cases	595	191	177	103	26	1092

OTHER INFECTIOUS DISEASES.—There were 218 admissions of cases other than Scarlet Fever, Diphtheria or Enteric Fever, *viz.*—

Erysipelas	.....	.....	25
Tonsillitis	.....	.....	20
Measles	.....	.....	118
Mumps	.....	.....	20
Varicella	.....	.....	9
Others	.....	.....	26
Total	.....	.....	218

WORK OF THE MEDICAL REFEREE.—The Senior Resident Medical Officer, Dr. A. W. Russell, is also Medical Referee to the Corporation, and during the year has carried out 548 examinations of Corporation employees and new staff.

EXAMINATIONS BY MEDICAL REFEREE.

Workmen's Compensation	229
Passenger Transport Department	142
New Staff	141
Special Examinations	29
Third Party Claims	7
Total	548

STAFF SICKNESS.—During the year there were 31 of the Staff off duty due to illness—2 on more than one occasion. The conditions arising were :—

Scarlet Fever	3	Prepatellar Bursitis	1
Diphtheria	2	Catarrhal Jaundice	1
Tonsillitis	12	Wound of Leg	1
Influenza	4	P.U.O.	1
Tonsilectomy	2	Chill	*2
Abscess	1	No stated illness	*5
Glands	1		
Haemorrhoids	1	Total	34
Scalds	1		
Enteritis	1		

(* Seen by outside Practitioner)

The discrepancy between 34 and 31 is accounted for by the fact that two nurses suffered from more than one illness during the year.

The cases of infectious disease occurred in members of the Staff of over two years standing, who were not Schick or Dick tested, because these procedures were not compulsory at the time they were appointed. No case of infectious disease occurred in a completely immunised member of the staff.

The choice of Medical Attendant for the Staff is optional—some being on the panel of the Deputy Medical Superintendent the remainder being on the panel of outside Practitioners,

TABLE XXIII.

NUMBER OF PATIENTS ADMITTED TO THE INFECTIOUS
DISEASES' HOSPITAL

(Small-pox Patients—Langstone Hospital) for the years 1883 to 1936.

Year	Small-pox	Scarlet Fever	Enteric or Typhoid	Diphtheria	Measles	Other Diseases	Totals
1883	5	1	....	....	1	....	7
1884	1	13	2	4	2	....	22
1885	8	16	6	6	1	....	37
1886	7	29	66	11	11	1	125
1887	20	56	37	27	4	3	147
1888	4	120	35	23	8	8	198
1889	6	278	48	18	5	8	363
1890	1	384	114	69	1	7	576
1891	....	180	51	52	22	18	323
1892	....	532	81	27	....	5	645
1893	6	503	94	12	6	5	626
1894	22	238	53	38	22	9	382
1895	....	177	83	46	15	25	346
1896	6	354	76	38	10	17	501
1897	....	413	102	37	6	11	569
1898	....	436	92	118	6	10	662
1899	1	333	96	225	....	2	657
1900	....	198	157	211	1	....	567
1901	1	270	101	170	....	....	542
1902	8	339	105	197	....	....	649
1903	3	572	70	211	....	2	858
1904	....	340	73	220	....	3	636
1905	10	274	57	198	....	....	539
1906	1	243	72	239	....	....	555
1907	....	202	109	235	....	....	546
1908	....	343	102	284	1	1	731
1909	....	631	96	354	1	....	1082
1910	....	850	114	336	....	....	1300
1911	....	635	70	436	....	....	1141
1912	....	702	71	782	....	....	1555
1913	....	730	55	652	....	....	1437
1914	....	469	110	615	....	....	1194
1915	....	630	33	684	....	27	1374
1916	....	340	47	589	....	35	1011
1917	....	383	21	340	4	48	796
1918	....	277	15	483	25	27	827
1919	....	250	10	520	10	156	946
1920	....	382	12	598	16	105	1113
1921	....	1010	26	482	8	71	1597
1922	....	996	14	555	6	41	1612
1923	....	595	24	669	6	98	1392
1924	....	518	29	477	5	108	1137
1925	....	834	23	754	8	89	1708
1926	....	489	12	924	10	73	1508
1927	....	539	16	723	4	99	1381
1928	....	684	13	848	3	102	1650
1929	....	702	6	727	1	70	1506
1930	....	609	32	570	6	94	1311
1931	....	530	5	340	7	126	1008
1932	....	600	12	233	14	125	984
1933	....	801	3	185	1	133	1123
1934	....	1232	4	332	15	188	1771
1935	....	583	5	420	10	186	1204
1936	....	644	13	249	118	163	1187

VENEREAL DISEASES.

The outstanding features of the year under review are :—

- (a) Further increase in the number of attendances at the Venereal Diseases Treatment Centre, chiefly in respect of women attending for gonorrhoea, *i.e.* 6,734 as compared with 4,446 during the previous year. This is the result of a more intensive following up of contacts, especially women. Both syphilis and gonorrhoea are more difficult to eradicate in women by virtue of the anatomy of the parts affected. If untreated, they constitute reservoirs of the disease for long periods, with recurrence of the infection in their male partner or partners.
- (b) Fewer cases of gonorrhoea dealt with for the first time at the Venereal Diseases Centre, no doubt attributable in large measure to the more intensive following up and treatment of women as in (a) above.

CO-ORDINATION.—Complete liason between all the agencies engaged in detecting and treating venereal diseases is essential if their incidence is to be further reduced.

Close co-operation between the out-patient treatment at the Venereal Diseases Centre and the in-patient treatment at Saint Mary's Hospital is ensured by the appointment of Mr. A. Murray Stuart, F.R.C.S., as part-time Visiting Medical Officer at Saint Mary's Hospital, as described in my Report last year.

In regard to congenital syphilis there is close co-operation of the Maternity and Child Welfare Centres and the School Medical Service with the Venereal Diseases Service in the detection of these forms of the disease.

Close co-ordination also continues between the Portsmouth Navy and Army Commands so far as the control and treatment of Venereal Diseases in the City are concerned. The sources of infection of civilians and of service men alike are frequently the same. In this connection the investigation of the Naval Health Officer into the sources of infection of all cases attending the Naval Clinic is of interest. During the year 1936, prostitutes were responsible for 61.6 per cent. of the infection and amateurs for 35.7 per cent. These figures agree generally with those of the Venereal Diseases Officer quoted in the following Report. In 2.7 per cent. of cases exposure was denied. Every effort is made, often with the help of the police, to trace these women and to induce them to undergo treatment.

The Venereal Diseases Officer, Mr. A. Murray Stuart, F.R.C.S. (Ed.) reports as follows on the work carried out at the Venereal Diseases Treatment Centre at the Royal Portsmouth Hospital :—

“ During the year 1936 there was a slight decrease in the number of patients attending for the first time. An analysis of these new cases shows that the patients found to be suffering from syphilis remained practically the same as in 1935, but there were 36 less cases of gonorrhoea and 27 fewer patients reported who were found not to be suffering from venereal disease.

It is gratifying to record that the percentage of patients who failed to complete their treatment and period of observation remains very low as compared with other Treatment Centres. There was a marked increase in the number of patients who completed their treatment for gonorrhoea, that is, those who were discharged from further attendance after undergoing their final tests of cure. This means, therefore, that many potential sources of infection have been removed. There was a slight increase in patients requiring in-patient treatment during the year. These cases are admitted to Saint Mary's Hospital under the Venereal Diseases Scheme and this arrangement ensures the admittance of the patients without delay. When they are fit to resume out-patient treatment they are discharged from the Hospital to continue their treatment at the Centre.

Four cases of gonorrhoeal vaginitis in children reported for the first time during the year. Congenital syphilitics showed a slight increase, this being due to a greater number of adults who presented manifestations of the disease. The number of children seen for the first time was 12; the total number of congenital syphilitics being 23. This compares very favourably with the figures in the past, when as many as 81 cases reported in one year.

The number of specimens sent for examination from the Centre to the Laboratory, Royal Portsmouth Hospital, has been kept down as low as possible for the sake of economy, and the total number was considerably less than in the previous year.

The new male patients who reported have been questioned as to the source of infection and the following figures are of interest :—

SYPHILIS		GONORRHOEA	
<i>Amateurs</i>	<i>Prostitutes</i>	<i>Amateurs</i>	<i>Prostitutes</i>
10	2	45	56

Every possible effort is made to ensure the attendance of the contacts at the Centre and the urgent necessity of regular attendance at the Centre until their period of treatment and observation is completed is impressed upon those requiring treatment.”

TABLE XXIV.

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE DURING THE YEAR ENDED 31st DECEMBER, 1936.

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
1. Number of cases on 1st January under treatment or observation	180	123	—	—	108	43	13	6	301	172	473
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	15	12	—	—	18	3	—	—	33	15	48
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary	8	—	—	—	—	—	—	—	8	—	8
„ secondary	11	24	—	—	—	—	—	—	11	24	11
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	51	38	—	—	—	—	—	—	51	38	89
„ congenital	13	10	—	—	—	—	—	—	13	10	23
Soft Chancre	—	—	1	—	—	—	—	—	1	—	1
Gonorrhoea, 1st year of infection	—	—	—	—	143	47	—	—	143	47	190
„ later	—	—	—	—	12	3	—	—	12	3	15
Conditions other than venereal	—	—	—	—	—	—	153	115	153	115	268
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation, at other Centres	17	8	—	—	42	12	—	—	59	20	79
TOTALS OF ITEMS 1, 2, 3 AND 4	295	215	1	—	323	108	166	121	785	444	1229
5. Number of cases discharged after completion of treatment and final tests of cure, or after diagnosis as non-venereal	20	13	1	—	99	44	160	114	280	171	451
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary	2	—	—	—	—	—	—	—	2	—	2
„ secondary	5	11	—	—	—	—	—	—	5	11	16
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	29	27	—	—	—	—	—	—	29	27	56
„ congenital	5	4	—	—	—	—	—	—	5	4	9
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	40	20	—	—	40	20	60
„ later	—	—	—	—	3	—	—	—	3	—	3
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure	14	8	—	—	17	3	—	—	31	11	42
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	26	7	—	—	55	16	—	—	81	23	104
9. Number of cases remaining under treatment or observation on 31st December	194	145	—	—	109	25	6	7	309	177	486
TOTALS OF ITEMS 5, 6, 7, 8 AND 9	295	215	1	—	323	108	166	121	785	444	1229

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	—	—	—	—	—	—	—	—	—	—	—
„ secondary	1	5	—	—	—	—	—	—	1	5	6
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	17	7	—	—	—	—	—	—	17	7	24
„ congenital	—	1	—	—	—	—	—	—	—	1	1
11. Number of attendances :—											
(a) for individual attention of the medical officer	2680	2163	12	—	2207	681	450	352	5349	3196	8545
(b) for intermediate treatment, e.g. irrigation, dressing	340	509	46	—	11062	6053	725	1205	12173	7767	19940
TOTAL ATTENDANCES	3020	2672	58	—	13269	6734	1175	1557	17522	10963	28485
12. In-patients :—											
(a) Total number of persons admitted for treatment during the year	5	7	—	—	5	10	—	2	10	19	29
(b) Aggregate number of “ In-patient days” of treatment given	156	241	—	—	35	488	—	16	191	745	936
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods	3	1	1	—	4	3	5	6	13	10	
14. Chief preparations used in treatment of Syphilis :—	Arsenical						Mercury		Bismuth		
	Approved Arsenobenzene Compounds						Others				
							Tryparsamide				
(a) Names of preparations	Novostab Novarsenobillon Sulphostab						—		Chlorostab		
(b) Total number of injections given (out-patients and in-patients)	2575						196		3100		

	Microscopical		Serum Tests		
	for spirochetes	for gonococci	Wassermann	Others for Syphilis	for Gonorrhoea
15. Pathological Work :—					
(a) Number of specimens examined at and by the medical officer of the treatment centre	50	—	—	217	—
(b) Number of specimens from patients attending at the treatment centre sent for examination to an approved laboratory	—	1694	937	48	191

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Portsmouth	Hampshire	West Sussex	Isle of Wight	Total
A. Number of cases from each area included under the following headings in Item 3 :—					
Syphilis	126	25	3	1	155
Soft Chancre	1	—	—	—	1
Gonorrhoea	161	35	6	3	205
Conditions other than venereal	217	47	3	1	268
TOTAL	505	107	12	5	629
B. Total number of attendances of all patients residing in each area	24145	4067	205	68	28485
C. Aggregate number of " In-patient days " of all patients residing in each area	850	54	19	13	936

TUBERCULOSIS.

CO-ORDINATION.—The arrangements described in my last Report to ensure complete co-ordination in our efforts to combat this disease have worked well during the year. The Tuberculosis Officer who directs the work of the Dispensary visits, at least once a week, all patients undergoing institutional treatment, and can thus supervise each phase of the treatment with resultant economy and avoidance of overlapping.

NOTIFICATIONS.—During the year under review there were 441 persons notified to the Medical Officer of Health as suffering from tuberculosis, or 60 more than last year. The increase is confined to the pulmonary form of the disease and affects chiefly the younger age groups. The explanation is found in the greater number of X-rays which the new powerful X-ray plant at Saint Mary's Hospital has now made possible, thus enabling early tuberculous lesions in the lung to be discovered, notified and treated before any change in physical signs can be detected by the stethoscope.

DEATHS.—The earlier a case of tuberculosis is notified the greater are the chances of recovery, and it is gratifying to be able to report—

- (a) the lowest number of deaths on record from pulmonary tuberculosis, *i.e.* 171, or 0.68 per 1,000 living, as compared with 192, or 0.76 last year ; and
- (b) the lowest number of deaths on record from all forms of the disease, *i.e.* 204, or 0.81 per 1,000 living, as compared with 0.84 last year, and as compared with an average of 0.94 for the past ten years.

There was a slight increase in the number of deaths from non-pulmonary tuberculosis (a large proportion of which is due to the drinking of tuberculous milk), *i.e.* 33, equivalent to a death rate of 0.13 per 1,000 living, as compared with 0.08 last year.

Table XXV and the graph on page 70 indicate the gradual decline in the number of deaths from tuberculosis since 1879, a decline towards which many factors have contributed, chief of which are no doubt the anti-tuberculosis measures inaugurated in 1913 with the opening of the Tuberculosis Dispensary, Anglesea Road, the steady process of educating the public on measures of prevention, the improved housing conditions and the general increase in the standard of living of the people.

TABLE XXV.

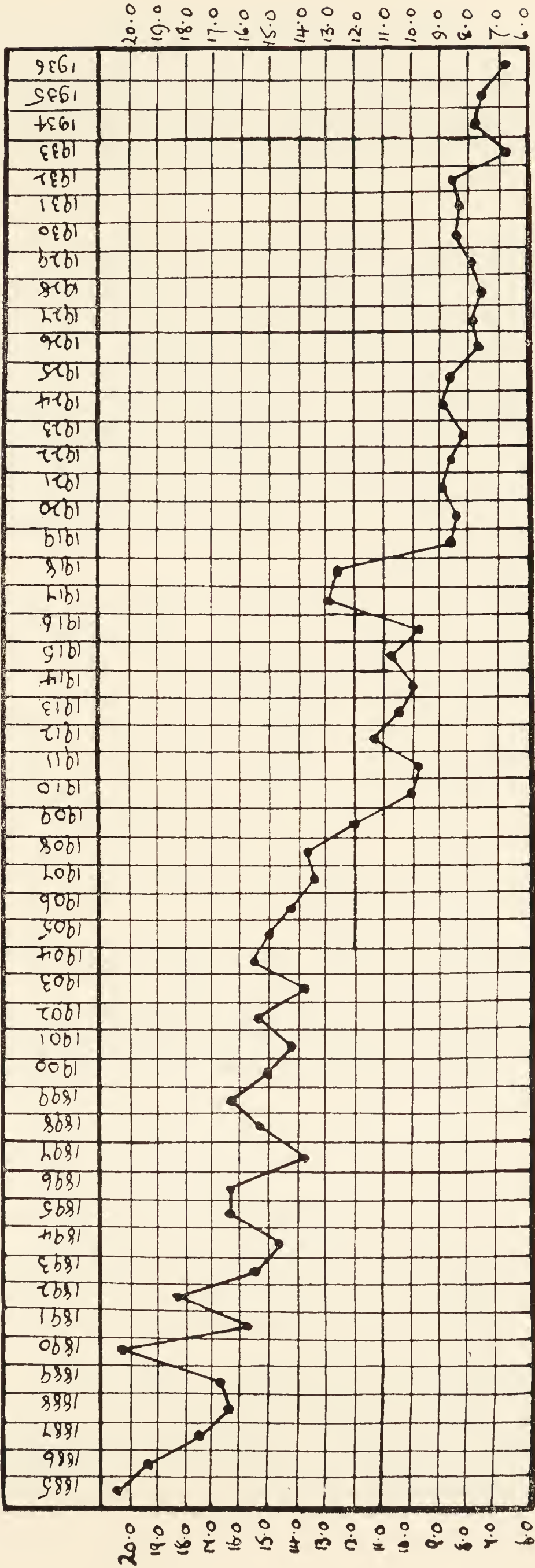
Table showing the number of Deaths and Death-rates per 1,000 living from TUBERCULAR DISEASES for Fifty-Eight Years (1879 to 1936).

Year	(1) Pulmonary Tuberculosis		(2) Tubercular Meningitis Hydrocephalus Deaths	(3) Other Forms of Tuberculosis Deaths	Totals of Cols. 2 and 3	
	Deaths	Rate			Deaths	Rate
1879	271	2.05	44	58	102	.77
1880	234	1.74	49	81	130	.96
1881	275	2.14	44	61	105	.81
1882	269	2.07	33	67	100	.76
1883	262	1.96	41	72	113	.84
1884	292	2.12	34	62	96	.69
1885	290	2.06	36	54	90	.64
1886	285	1.98	38	85	123	.86
1887	261	1.77	41	95	136	.92
1888	240	1.60	38	90	128	.85
1889	251	1.63	35	93	128	.83
1890	319	2.03	37	57	94	.60
1891	252	1.57	41	86	127	.79
1892	308	1.89	31	51	82	.50
1893	254	1.53	32	59	91	.55
1894	241	1.43	21	50	71	.42
1895	280	1.64	43	50	93	.54
1896	283	1.63	51	55	106	.61
1897	245	1.38	39	33	72	.39
1898	277	1.54	37	57	94	.52
1899	295	1.61	40	64	104	.57
1900	286	1.53	42	53	95	.51
1901	278	1.47	37	91	128	.67
1902	308	1.58	31	51	82	.42
1903	269	1.35	35	34	69	.34
1904	321	1.58	44	32	76	.37
1905	314	1.52	42	25	67	.32
1906	306	1.45	38	36	74	.35
1907	282	1.31	47	36	83	.38
1908	300	1.36	39	38	77	.35
1909	272	1.21	41	33	74	.33
1910	249	1.09	40	23	63	.28
1911	239	1.02	36	23	59	.25
1912	267	1.13	30	46	76	.32
1913	264	1.08	41	40	81	.33
1914	249	1.01	33	52	85	.34
*1915	233	1.15	51	69	120	.59
*1916	188	0.95	39	48	87	.43
*1917	269	1.35	38	62	100	.50
*1918	261	1.28	23	45	68	.33
*1919	197	0.88	25	37	62	.27
*1920	197	0.84	19	36	55	.23
*1921	211	0.90	22	26	48	.20
*1922	207	0.87	17	38	55	.23
*1923	191	0.82	21	16	37	.16
*1924	222	0.93	18	36	54	.23
*1925	204	0.87	27	23	50	.21
*1926	183	0.79	18	20	38	.16
*1927	182	0.78	27	24	51	.22
*1928	179	0.74	26	23	49	.20
*1929	192	0.79	26	9	35	.14
*1930	208	0.85	26	14	40	.16
*1931	189	0.82	17	21	38	.16
1932	213	0.84	22	18	40	.15
1933	170	0.67	17	12	29	.11
1934	197	0.79	15	28	43	.17
1935	192	0.76	15	4	19	.08
1936	171	0.68	13	20	33	.13

* Calculated on estimated civil population.

TABLE XXVI.

Chart showing Deaths from Pulmonary Tuberculosis per 10,000 population since 1885.



THE WORK OF THE TUBERCULOSIS
DISPENSARY AND SANATORIA.

By I. M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.
(*Tuberculosis Officer and Senior Assistant M.O.H.*)

Dispensary.—Table XXVIII (page 76) gives statistical details of the work done at the Dispensary during the year 1936. During the year 692 new cases were examined and the diagnosis confirmed in 295, or 42.63% ; 374, or 54.04% proved not to be tubercular. Of the remainder, 23, the diagnosis had not been completed. There was an increase of 213 new cases as compared with those of 1935. Attendances at the Dispensary showed an increase of 913 and the visits paid by the tuberculosis nurses were increased by 964. It is the aim of the service to have all patients on the Dispensary Register visited at least four times each year.

The number of contacts examined at the Dispensary, whilst larger than the previous year (216 as compared with 190 in 1935) is very disappointing. There appears to be an apathy on the part of the parents to bring the children for examination. The fact that at the time of discovery of a case of tuberculosis in the family the other children appear quite well seems to lull the parents into a sense of false security.

The numbers of X-ray (screening and films) and sputa examinations were very considerably increased as compared with those done in 1935.

The following table sets the foregoing remarks in tabular form. A comparison is made with 1935.

Year	New Cases	Definite Cases of Tuberculosis	Not Tubercular or Indefinite	Number of Contacts	Number of Sputa	Number of X-Ray Examinations	Attendances at the Dispensary	No. of Visits by Tuberculosis Nurses
1935	479	241	238	190	1587	661	4683	5638
1936	692	295	397	216	1974	1664	5596	6602

Institutional.—There has been no change in the number of beds available for the treatment of cases of tuberculosis, details of which are given below :—

Langstone Sanatorium	.....	.....	.....	35
Saint Mary's Hospital	.....	.....	.....	70
Infectious Diseases Hospital	.....	.....	.....	32
Other sanatoria (Ventnor, Bournemouth, Bramshott, Alton)	.....	.....	.....	As required

The Tuberculosis Officer pays a weekly consultative visit to the Hospitals and Sanatorium. There is a steady demand for beds and on odd occasions a considerable waiting list for admission.

Treatment.—The basis of treatment in tuberculosis is rest in bed—this cannot be too strongly emphasised—fresh air and regulated diet. There are many other auxiliary treatments, the method employed depending entirely on the condition of the patient. All modern methods of treatment are available at Saint Mary's Hospital and Infectious Diseases Hospital. These consist of Artificial Pneumothorax, aurotherapy, sanocrysin, myocrysine, solganol, lopion, nordalin and tuberculin. In certain cases surgical means such as phrenic exairesis or evulsion and thoracoplasty are employed.

GOLD THERAPY.—A total of 415 injections of myocrisine were given totalling 66.4 gms.

			<i>Cases discharged</i>	<i>Cases still in</i>	<i>Total</i>
Number of injections	....	....	190	225	415
Gms. of myocrisine given	....	....	31.5	34.9	66.4

The results of treatment were :—

16 Cases were treated with myocrisine injections ; 7 completed one course with the following results—

6 were discharged “ improved ” and 1 “ not improved.”

In 2 cases sputum previously T.B.+ became negative, and in another sputum disappeared. In the remaining 4 cases sputum remained positive.

Grades attained on discharge were—

3 cases “ up all day ”

2 cases “ up 6 hours ”

1 case “ up 2 hours ”

1 case “ still in bed.”

The number of patients treated is too small for any justifiable criticism. The results, however, are considered sufficiently encouraging to warrant continuation of the treatment in selected cases,

The reasons for not completing one course were :—

- 5 discharged or transferred.
- 2 owing to activation of the disease.
- 1 owing to enteritis.
- 1 owing to dermatitis.

NORDALIN.—9 cases were discharged having had treatment with Nordalin. In 3 of these cases treatment was stopped on account of activation of the disease.

Of the 6 remaining cases :—

- 1 was discharged before any result could be expected.
- 1 improved.
- 1 worse.
- 3 showed no change.

PNEUMOTHORAX.—Seven cases were attempted. Three were unsuccessful on account of adhesions. Of the four successful cases three previously sputum positive cases became negative, the fourth being negative throughout. On discharge, two of these cases were up all day and able to do light work.

TUBERCULIN.—In six cases treated by injections of tuberculin the results were unsatisfactory.

WHOLE BLOOD INJECTIONS.—Several cases received these injections on account of persistent slight haemoptyses, with very encouraging results.

These treatments are carried out mainly at the Infectious Diseases Hospital under the supervision of Dr. J. Q. Mountain, the Junior Resident Medical Officer. The following table gives details of these treatments.

				<i>Cases discharged</i>	<i>Cases still in</i>	<i>Total</i>
Artificial Pneumothorax.						
Inductions	....	....	....	10	4	14
Refills	....	....	....	60	61	121
Aspiration of fluid and replacement of air	....			—	4	4
Gold Therapy.						
Number of Injections	....	....	....	190	225	415
Grams of Myocrisine	....	....	....	31.5	34.9	66.4
Tuberculin.						
Number of Injections	....	....	....	6	64	70
Nordalin.						
Number of Cases treated		....	....	9	6	15
Whole Blood Injections.						
Number of Injections	....	....	....	6		6

Langstone Sanatorium.

Thirty-five beds are available here for the sanatorium treatment of tuberculosis and pre-tubercular cases, as follows—

Male	.....	.....	.....	.....	.....	17
Female	.....	.....	.....	.....	.....	8
BEACH LODGE for children under 12 years of age (Non-pulmonary tuberculosis and the pre-tubercular state)						10

Wherever possible, cases are sent here in the convalescent stage and strict sanatorium routine is carried out in conjunction with graduated exercise (Table XXX).

TUBERCULOSIS.

TABLE XXVII.

NEW CASES AND MORTALITY DURING 1936.

Age Periods	* NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	—	1	2	1	—	—	1	3
1 „ 5	—	—	6	2	—	—	4	1
5 „ 15	9	8	9	17	2	2	4	4
15 „ 25	39	53	5	7	14	21	2	3
25 „ 35	42	51	2	5	22	17	2	2
35 „ 45	46	22	2	2	23	10	—	1
45 „ 55	30	23	1	3	14	7	1	2
55 „ 65	25	8	—	—	18	7	—	1
65 & upwards	13	6	—	1	9	5	—	2
TOTALS	204	172	27	38	102	69	14	19

* Includes primary notifications and new cases which came to the knowledge of the Medical Officer of Health by other means.

N.B.—Of the total number of 204 deaths registered from all forms of tuberculosis, 29, or 14 per cent., had not been notified during life as suffering from the disease.

TABLE XXVIII.

Showing the work of the Dispensary during 1936.

DIAGNOSIS	PULMONARY				NON-PULMONARY				TOTAL				GRAND TOTAL	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous	131	112	9	12	5	3	6	17	136	115	15	29	295	
(b) Diagnosis not completed ....	....	....	....	....	....	....	....	....	9	5	6	3	23	
(c) Non-tuberculous ....	....	....	....	....	....	....	....	....	113	150	62	49	374	
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	1	6	1	....	....	....	....	....	1	6	1	....	8	
(b) Diagnosis not completed ....	....	....	....	....	....	....	....	....	2	5	1	4	12	
(c) Non-tuberculous ....	....	....	....	....	....	....	....	....	12	46	73	65	196	
C.—CASES written off the Dispensary Register as :—														
(a) Recovered	12	8	4	2	1	2	4	1	13	10	8	3	34	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ....	....	....	....	....	....	....	....	....	127	198	136	115	576	
D.—NUMBER OF CASES on Dispensary Register on December 31st :—														
(a) Definitely tuberculous	467	399	48	44	27	30	72	79	494	428	120	123	1165	
(b) Diagnosis not completed ....	....	....	....	....	....	....	....	....	11	10	7	7	35	
1. Number of cases on Dispensary Register on January 1st 1093														
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 59														
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of " 107														
4. Cases written off during the year as Dead (all causes) 143														
5. Number of attendances at the Dispensary (including Contacts) 5596														
6. Number of Insured Persons under Domiciliary Treatment on the 31st December 138														
7. Number of consultations with medical prac- titioners :— (a) Personal 115 (b) Other 1384														
8. Number of visits by Tuberculosis Officers to homes (including personal consultations) 115														
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes 6602														
10. Number of :— (a) Specimens of sputum, etc., examined 1974 (b) X-ray examinations made in connection with Dispensary work 1644														
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above Nil														
12. Number of "T.B. plus" cases on Dispensary Register on December 31st 344														

TABLE XXIX.

Showing the immediate results of treatment of definitely Tuberculous Patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

Classification on admission to the Institution		Condition at time of discharge.	Duration of Residential Treatment in the Institution.															Grand Totals
			Under 3 months			3-6 months			6-12 months			More than 12 months			Totals			
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Class T.B. minus	Quiescent	....	2	3	1	10	5	4	2	....	....	1	....	....	15	8	5	28
	Not quiescent	....	5	5	1	4	3	1	1	2	....	....	1	....	10	11	2	23
	Died in Institution	....	....	....	....	1	....	....	....	....	....	....	....	....	1	....	1	
Class T.B. plus Group I	Quiescent	....	3	....	....	4	3	....	....	1	1	1	....	....	8	4	1	13
	Not quiescent	....	6	....	....	1	1	....	2	1	....	....	....	....	9	2	....	11
	Died in Institution	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
Class T.B. plus Group II	Quiescent	....	1	1	....	4	3	....	7	3	....	....	....	....	12	7	....	19
	Not quiescent	....	4	5	....	10	2	....	6	2	....	....	3	....	20	12	....	32
	Died in Institution	....	....	....	....	....	....	....	1	....	....	....	....	....	1	....	....	1
Class T.B. plus Group III	Quiescent	....	....	....	....	....	....	....	1	2	....	....	....	....	1	2	....	3
	Not quiescent	....	4	2	....	3	2	....	1	3	....	....	....	....	8	7	....	15
	Died in Institution	....	6	7	....	3	6	1	3	3	1	2	....	....	14	16	2	32
TOTALS (pulmonary)			31	23	2	39	26	6	24	17	2	4	4	....	98	70	10	178
Bones and Joints	Quiescent	....	....	2	2	....	....	3	1	4	2	....	1	5	1	7	12	20
	Not quiescent	....	....	....	....	2	....	....	....	1	....	....	....	....	2	1	....	3
	Died in Institution	....	....	....	....	....	....	1	....	....	....	1	....	....	1	....	1	2
Abdominal	Quiescent	....	....	....	....	....	....	4	....	....	1	....	....	....	....	....	5	5
	Not quiescent	....	....	....	1	....	....	....	....	1	1	....	....	....	....	1	2	3
	Died in Institution	....	....	....	1	....	....	....	....	....	....	....	....	....	....	....	1	1
Other Organs	Quiescent	....	....	....	....	1	....	....	....	....	....	....	....	....	1	....	....	1
	Not quiescent	....	....	....	....	1	....	....	....	....	....	....	1	....	1	1	....	2
	Died in Institution	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
Peri- pheral glands	Quiescent	....	....	....	1	....	....	5	....	....	2	....	....	....	....	....	8	8
	Not quiescent	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
	Died in Institution	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
TOTALS (non-pulmonary)			....	2	5	4	....	13	1	6	6	1	2	5	6	10	29	45

TABLE XXX.
LANGSTONE SANATORIUM.

Grade of Exercise attained by Adult Cases before discharge.

Grade	Badge	Exercise	Males	Females	Total
I.	White	Up 4, 6 or 8 hours. Quiet games, except billiards.	3	1	4
II.	Yellow	Up all day. Specified light ward duties. Limited slow walking exercise.	5	2	7
III.	Green	Up all day. Specified ward duties, requiring more exertion. Further walking exercise (1 mile).	6	1	7
IV.	Red	Up all day. Specified ward duties, requiring still more exertion. Long distance walking, increasing.	13	9	22

40 Patients were discharged, excluding 5 bed cases (not graded).

TABLE XXXI.

Total Number of Patients treated at various Sanatoria, Hospitals
and Colonies during 1936.

SANATORIUM, HOSPITAL OR COLONY	Resident at beginning of year	Admitted during year	Discharged or died during year	Remaining end of year	Totals
Langstone Sanatorium	16	55	51	20	71
Beach Lodge	8	24	22	10	32
Milton Hospital	29	63	61	31	92
Saint Mary's Hospital	59	200	196	63	259
Royal National Sanatorium, Bournemouth	—	4	2	2	4
Royal National Hospital for Consumption, Ventnor	1	8	5	4	9
Lord Mayor Treloar Cripples' Hospital	17	10	12	15	27
King George V Sanatorium for Sailors, Bramshott	1	1	1	1	2
Royal Sea Bathing Hospital, Margate	3	—	2	1	3
Papworth Training Colony	—	1	—	1	1
Totals	134	366	352	148	500

PREVENTION AND TREATMENT OF BLINDNESS.—I am indebted to Mr. E. Tunncliffe, Superintendent to the Blind Persons Act Committee, for the following information :—

“ The City Council continue to carry out their duties, with reference to the welfare of the Blind, by working through their Blind Persons Act Committee, and in conjunction with the local Voluntary Association for the Blind.

The number of registered blind persons, of all ages, resident in Portsmouth at the close of the year, was 524 ; this number is the same as the average for the past five years. The number of young blind persons, those under 16 years of age, happily shows a decrease, the number now being 18 as compared with 21 a year ago. It is not too much to assume that this welcome reduction is due largely to the supervision and preventive measures taken by the Medical Officers of the Local Authority and their staff.

The four Home Visitors employed by the City Council (Blind Persons Act Committee) are prompt to report cases of persons suffering from defective vision and suitable action is at once taken by the appropriate Committee of the Council. Suitable cases are referred to the Oculist for examination and report.

The Home for Aged and Infirm Blind Persons which was established by the City Council a year ago has been fully occupied during the whole of the year. The benefits of the Home are very greatly appreciated by the residents.

The Council's arrangements for the provision of Domiciliary Assistance to Unemployable and other Necessitous Blind Persons resident in Portsmouth continue to work very satisfactorily.”

CANCER.—During 1936 the number of deaths from Cancer was exactly the same as in the previous year, *i.e.* :—410, equivalent to a cancer death rate of 1.63 per 1,000 living. From Table XXXII it will be seen that the decrease is most marked in the age group 55 to 65.

There is no special Cancer Clinic in Portsmouth, but facilities are available at the Royal Portsmouth Hospital and Saint Mary's Municipal Hospital, for diagnosis and treatment. Complete co-ordination exists between these two hospitals in this respect. As Deep and Superficial X-ray therapy is playing an ever increasing part in the treatment of cancer the Sub-Health (Hospitals Governors) Committee, after consultation with the representatives of the Royal Portsmouth Hospital and the Eye and Ear Hospital, decided to recommend to the City Council the purchase of Deep and Superficial X-ray Therapy Units to be installed at Saint Mary's Hospital at a cost of about £2,000.

The Royal Portsmouth Hospital possesses a supply of radium, 223 milligrammes, purchased by public subscription, and Portsmouth cases, including cases from Saint Mary's Municipal Hospital, are treated there, unless accommodation is not available, when they are sent to the Radium Institute, London.

Every opportunity is taken by means of lectures and printed announcements to impress upon the inhabitants the importance of early treatment of the disease.

Towards the end of the year under review arrangements were made to hold a meeting for the purpose of exploring a Scheme for the co-ordination of the radiological treatment of cancer in the Wessex Area, *i.e.* West Sussex, Hampshire, the Isle of Wight, East Wiltshire and Dorset. Facilities for radiological treatment of cancer in the Wessex Area are at present inadequate, especially in the rural areas, and there is need to consider a co-ordinated Scheme in which the Local Authorities, Voluntary Hospitals, the Radium Commission and the British Empire Cancer Campaign will participate.

TABLE XXXII.
Analysis of the deaths from Cancer at various groups of ages during the year.

	15—25		25—35		35—45		45—55		55—65		65—75		75 and over		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Cancer of the buccal cavity and pharynx	—	—	—	—	—	—	1	1	9	1	15	1	5	—	30	3
Cancer of the digestive organs and peritoneum	—	1	—	2	8	6	10	9	30	22	45	38	23	22	116	100
Cancer of the respiratory organs	—	—	—	—	2	5	6	1	4	5	5	7	—	1	17	19
Cancer of the uterus	—	—	—	—	—	2	—	7	—	7	—	7	—	4	—	27
Cancer of other female genital organs	—	—	—	—	—	1	—	5	—	4	—	1	—	3	—	14
Cancer of the breast	—	—	—	1	—	1	—	4	—	9	—	8	—	5	—	28
Cancer of the male genito-urinary organs	—	—	—	—	—	—	1	—	8	—	8	—	2	—	19	—
Cancer of the skin	—	—	—	—	—	—	—	1	—	—	—	1	3	—	3	2
Cancer of other or unspecified organs	1	—	—	—	2	—	4	3	3	3	2	9	3	2	15	17
TOTAL	1	1	—	3	12	15	22	31	54	51	75	72	36	37	200	210

GRAND TOTAL 410

MATERNITY AND CHILD WELFARE

(Figures for the previous year are included
in brackets for comparative purposes).

MATERNITY AND CHILD WELFARE.

The following are the main features of interest in this section of the Department during the year under review :—

- (a) a further marked decrease in the maternal mortality rate to 2.21, the second lowest on record ;
- (b) a slight increase in the infantile mortality rate ; and
- (c) the coming into operation of the Scheme for the more effective co-ordination between the Child Welfare Service and the School Medical Service.

MATERNAL MORTALITY AND MORBIDITY.

During 1936, 9 maternal deaths occurred, giving a maternal mortality rate of 2.21, which is the second lowest on record. This is a satisfactory reduction over the year 1935, which was 3.91, and compares very favourably with that for the country as a whole, *i.e.* 3.65. The reduction is attributable chiefly to the marked decrease in the deaths from sepsis, *i.e.* 0.73 as compared with 2.87 for the previous year, a decrease in which the new scheme, introduced last year for the free provision of masks to all midwives in the City, probably played a part.

The following is an analysis of the causes of death :—

Peritonitis following salpingitis	.....	.....	1
Ruptured uterus	.....	.....	1
Eclampsia	.....	.....	1
Placenta praevia	.....	.....	1
Air embolism	.....	.....	1
Peritonitis following ectopic gestation		.....	1
Septicaemia following septic abortion		.....	1
Puerperal septicaemia	.....	.....	1
Post-partum haemorrhage	.....	.....	1

TABLE XXXIII.

Comparison of the Maternal and Infantile Mortality Rates in Portsmouth and England and Wales during the past 13 years.

Year	MATERNAL MORTALITY*			INFANTILE MORTALITY*	
	Portsmouth		England & Wales	Portsmouth	England & Wales
	From Sepsis	Total	Total		
1924	1.19	3.98	3.90	66	74
1925	0.63	2.51	4.08	62	75
1926	—	3.11	4.12	55	70
1927	2.12	4.49	4.11	55	70
1928	3.15	5.4	4.42	55	65
1929	1.59	3.4	4.33	66	74
1930	1.64	2.3	4.40	59	60
1931	0.44	2.3	4.11	55	66
1932	0.93	2.34	4.04	60	65
1933	0.99	1.98	4.23	51	64
1934	1.96	4.66	4.41	44	59
1935	2.87	3.91	3.93	46	57
1936	0.73	2.21	3.65	49	59

* The Maternal Mortality Rate is calculated per 1,000 total births, and the Infantile Mortality Rate per 1,000 live births.

INSTITUTIONAL TREATMENT.—Last year was the first full year during which maternity services have been concentrated at Saint Mary's Hospital, where there is a complete maternity unit of 70 beds with all the facilities offered by an up-to-date Maternity Hospital. This is in conformity with the recommendation of the Departmental Committee on Maternal Mortality and Morbidity that "maternity accommodation should, where possible, be associated with general hospitals."

Saint Mary's Hospital is becoming increasingly popular with mothers and during the year no fewer than 756 were admitted. Expectant mothers who have booked to enter for their confinements are examined periodically before and after the event by Dr. Gilbey, one of the senior Resident Medical Officers. The number of ante-natal and post-natal clinics held at the Hospital during the year was 218, and the number of attendances was 7,126, as compared with 3,681 during 1935.

As stated in my last Report, the City Council approved the appointment of a Consultant Obstetrician to visit the Maternity Unit at least once a week and to hold a Consulting Ante-natal and Post-natal Clinic. Mr. Trevor Barnett, M.D. F.R.C.S., was appointed, and he commenced duty on April 1st, 1936.

ANTE-NATAL CLINIC AT COSHAM.—On the recommendation of the Ministry of Health an Ante-Natal Clinic was opened at Cosham on June 16th, 1936, and has been made good use of by the expectant mothers in the outlying districts of the City.

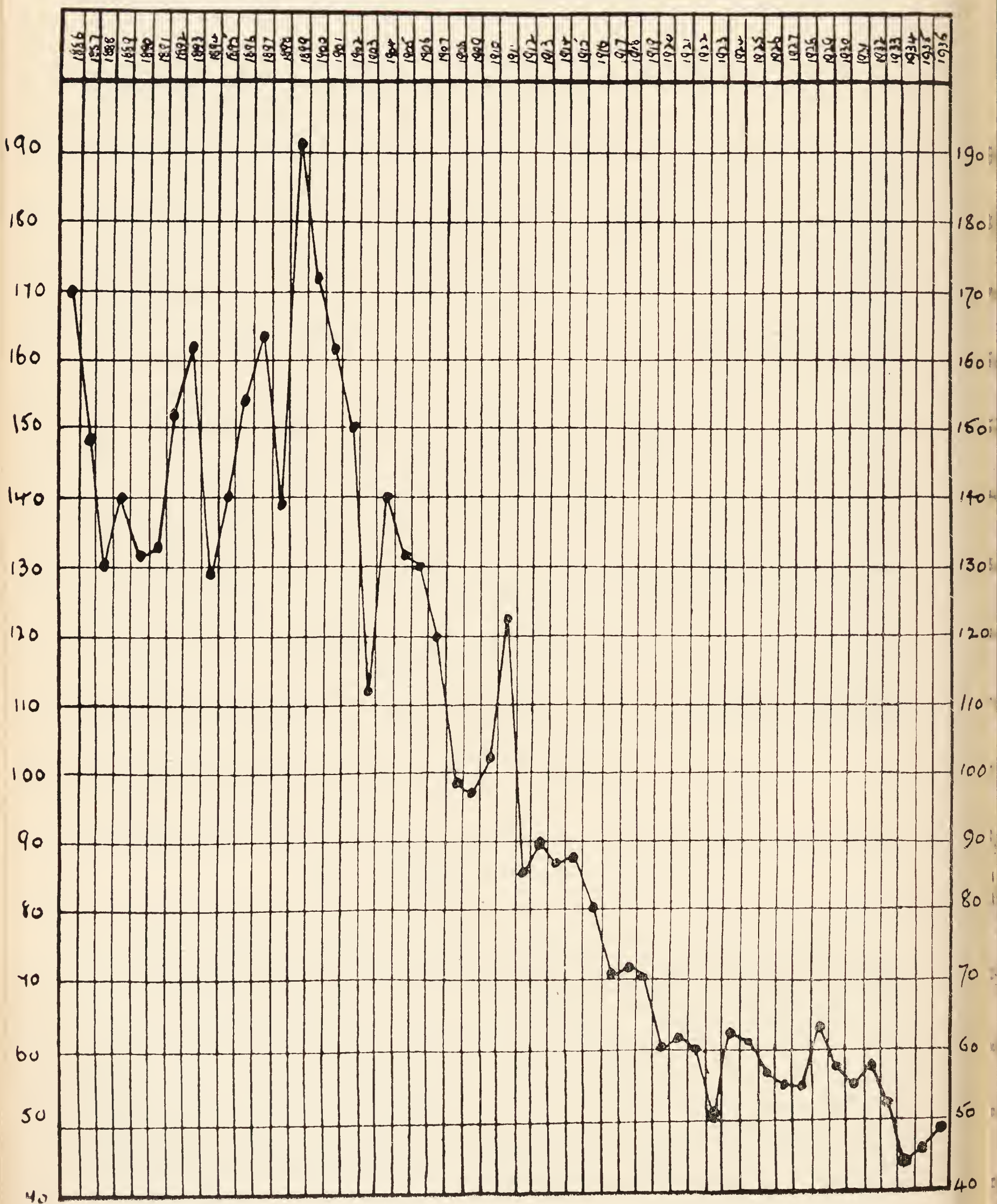
MIDWIVES ACT, 1936.—On July 31st of the year under review the new Midwives Act was placed on the Statute Book. Under the provisions of Section 1 of the Act, an obligation is laid upon Local Supervising Authorities to provide an adequate service of midwives who will be available for attendance on women in their own homes, not only as midwives but also as maternity nurses. A complete scheme for the appointment of a Superintendent Midwife and 26 midwives was approved by the City Council and forwarded to the Minister of Health for his approval by the end of the year.

CHILD WELFARE.

STATISTICS.—The number of children under one year of age who died in 1936 was 194, equivalent to an infantile mortality rate of 49.6, as compared with 46 for the previous year, and an average of 55.8 for the preceding 10 years. The causes of death are set out in Table XXXIV, from which it will be seen that slightly more than one-half of the children died during the first four weeks, and that the principal causes contributing to the infant death rate were prematurity, pneumonia, congenital malformations and diarrhoea, in order of numerical importance.

TABLE XXXV.

Chart showing the number of Deaths under 1 year of age
to 1,000 Births in Portsmouth, 1886 to 1936.



The causes of premature birth are various—ill-health of the mother, complications of pregnancy, accident, etc—and they can be reduced only by more adequate ante-natal care of the expectant mother. Congenital malformations and developmental defects of the infant similarly are to be attributed to ante-natal causes of which for the most part our knowledge is still incomplete, and which are not likely to be easily controlled by public health measures. There is evidence, however, that increased attention to the mother in pregnancy and childbirth will, in due course, reduce still further the number of infant deaths, especially those of the first month after birth.

THE PRE-SCHOOL CHILD.—The scheme for the more effective co-ordination of the Public Health Service with the School Medical Service, as outlined on page 12 of my Report last year, came into operation on January 1st, 1936. A Toddlers' Clinic was opened in July, 1936, and progress was made in bridging still further the gap between the age of two years and school age, details of which will be found in the report of the Child Welfare Officer.

VOLUNTARY WELFARE CENTRES.—Portsmouth is fortunate in having two voluntary organisations which do excellent work in connection with the Maternity and Child Welfare in the City, *i.e.*—

(a) THE ROYAL NAVAL AND ROYAL MARINE MATERNITY HOME AND CHILD WELFARE CENTRE, 45-49, COMMERCIAL ROAD, which is a complete and up-to-date unit. The City Council contributes towards its funds. During the year 379 (371) new cases were seen by the Medical Officer, Dr. A. Erskine Clark, at the Child Welfare Centre, the total attendances being 2,893 (3,335).

Ante-natal and Post-natal Clinics are also held. At the former 457 (565) patients made 2,889 (2,843) attendances, and at the latter 326 (331) made 485 (444) attendances.

(b) A Child Welfare Centre is conducted by the Military Authorities at Cambridge Barracks at which 163 (142) patients made 1,986 (2,383) attendances. An Ante-natal Clinic is also conducted, 156 (130) patients making 793 (570) attendances.

REPORT ON THE WORK OF THE MATERNITY SERVICES, INCLUDING SUPERVISION OF MIDWIVES.

By RUBY N. FOGGIE, M.B., Ch.B., *Maternity Officer and Inspector of Midwives.*

MIDWIVES.—The number of midwives practising in the City was 72 (66) and they attended 3,172 (3,097) cases. Of these confinements they attended 2,657 (2,585) in the capacity of midwives and 515 (512) as maternity nurses. Generally speaking, the practice of the midwives has been satisfactory. Through the operation of the Insurance Scheme under the Midwives' Act there is no difficulty in patients obtaining the services of a medical man when required. Medical assistance was sent for in 1,081 (1,095) or 41 per cent. (42 per cent.) of midwives' cases (see Table XXXVI). The total amount paid by the Local Authority to medical men called in by midwives was £1,347 (£1,572 1s. 6d.), out of which £527 10s. 0d. (£544 6s. 9d.) was received from patients and premiums under the Insurance Scheme. Midwives sent for medical assistance in 48.5 (48.4) per cent. of their cases when the patient was insured under the Scheme, and in 18.2 (30) per cent. where not insured. The inspection of the midwives' bags, books and appliances was carried out regularly during the year.

TABLE XXXVI.

Table shewing number of cases and various reasons for which medical help was sought by Midwives, and notifications received from Midwives under Rule E. 33 of the Central Midwives' Board during the year, compared with 1935.

Cases of sending for medical help—Rule E. 33a :—					1936	1935
During pregnancy—						
For abortion	....	....	....	....	28	29
For albuminuria	....	....	....	....	30	34
For convulsions	....	....	....	....	1	—
For other causes	....	....	....	....	178	202
					— 237	— 267
During labour—						
For Ante-partum haemorrhage	....	....	....	....	44	23
For Delayed Labour	....	....	....	....	201	199
For Mal-presentation	....	....	....	....	57	37
For Ruptured Perineum	....	....	....	....	201	170
For Retained Placenta	....	....	....	....	14	21
For other causes	....	....	....	....	34	81
					— 551	— 531
During lying-in—						
For convulsions	....	....	....	....	—	1
For rise of Temperature	....	....	....	....	20	22
For Post-partum haemorrhage	....	....	....	....	22	21
For other causes	....	....	....	....	74	66
					— 116	— 110
For the Infant—						
For still-birth	....	....	....	....	10	6
For death	....	....	....	....	—	2
For discharging eyes	....	....	....	....	58	71
For other causes	....	....	....	....	109	108
					— 177	— 187
					Total 1081	1095
No. of notifications received from Midwives in cases—						
Of death (Rule E. 33b)	....	....	....	....	2	3
Still-birth (Rule E. 33c)	....	....	....	....	34	16
Of having laid out dead body (Rule E. 33d)					4	1
Of liability of source of infection (Rule E. 33e)					3	1
In cases of artificial feeding (Rule E. 33f)					25	21
					—	—
					Total 68	42
					—	—

TABLE XXXVII.
ROLL OF MIDWIVES PRACTISING WITHIN THE CITY OF PORTSMOUTH.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1936
1. Ainsley	Clarissa Mary	25, Outram Road	51397	14th Aug., '20	5th January
2. Amsden	Anne Winifred	11, Tangier Road	62675	9th April, '24	18th January
3. Attley	Lydia E.	28, Victoria Road North, Southsea	87286	12th Aug., '33	12th October
4. Bampton	Dorothy Vera	31, Collins Road	68136	25th Feb., '26	25th January
5. Barnes	Eliza	109, Church Road	23295	26th April, '06	9th January
6. Barnes	Elizabeth	109, Church Road	27020	15th Oct., '08	10th January
7. Blake	Ellen M.	12, Haslemere Road	27693	16th Dec., '08	16th January
8. Bragg	Sarah	118, St. Augustine Road	42180	1st May, '15	12th January
9. Brassfield	Frances Mary	26, Besant Road	47125	11th May, '18	8th February
10. Brinn	Rosina	63, Ophir Road	29590	30th Oct., '09	9th January
11. Brockett	Ellen	23, Outram Road	45584	14th May, '17	9th January
12. Caton	Kathleen	3, Galt Road, Farlington	64753	10th Dec., '24	10th January
13. Challis	Patty Jane	37, Aylesbury Road	4208	28th April, '04	8th January
14. Chiverell	Louise	43, Totland Road, Cosham	65495	9th Feb., '35	29th June
15. Clark	Margaret	"Inglenook," Havant Road, Cosham	85848	10th Mar., '33	24th January
16. Clarke	Gertrude	16, Second Avenue, Cosham	17540	23rd Mar., '05	10th January
17. Clarke	Gwendoline	Royal Naval Maternity Home	45983	11th Aug., '17	8th January
18. Cowell	Mary A.	57, St. Piran's Avenue	69902	16th Dec., '26	27th January
19. Crafts	Elizabeth	14, Alexandra Road	39421	17th Dec., '13	8th January
20. Diamond	Agnes Mary	28, Victoria Road North	76920	23rd Nov., '29	15th January
21. Elliott	Mary Ann Leah	6, Ruskin Road	5487	30th June, '04	13th January
22. Farr	Mary	6, Longs Road	52338	10th Nov., '20	8th January
23. Field	Ethel Fanny	22a, Priory Crescent	54222	11th June, '21	13th January
24. Foley	Louisa A.	8, Thurbern Road	37918	28th April, '13	15th January
25. Foot	Alice Maud Mary	277, Milton Road	54229	11th June, '21	12th January
26. Franklin	Winifred M.	Royal Naval Maternity Home	96835	15th Aug., '35	15th Sept.
27. Gemmell	Jane Frances	15, Edgerley Gardens, Cosham	88265	25th Nov., '33	10th January
28. Gilman	Kathleen	"Inglenook," Havant Road, Cosham	83737	27th May, '36	27th May
29. Godwin	Julia	6, Dean Road, Cosham	65151	29th Jan., '25	9th January
30. Goodman	Lucy Ann	21, North End Avenue	26437	21st May, '08	9th January
31. Heard	Mabel Vosper	28, Victoria Road North	34558	28th Nov., '11	11th January
32. Hebington	Aileen Mary	63, Margate Road	70015	16th Dec., '26	9th January
33. Hebington	Eliza	31, Curzon Howe Road	50981	12th May, '20	7th Sept.
34. Hodge	Ada J.	73, King Street, Southsea	50992	12th May, '20	9th January
35. Horton	Winifred	Naval Welfare Centre	66858	15th Aug., '25	9th January
36. Howard	Lydia	49, Wisborough Road	63413	11th June, '24	15th January
37. Hughes	Rose Lavinia	28, Victoria Road North	92214	23rd Feb., '35	12th January

ROLL OF MIDWIVES—continued.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1936
38. Jack	Emma	11, Shaftesbury Road	47280	11th May, '18	11th February
39. Jago	Clara Sara	4, Chatsworth Avenue	23268	6th Feb., '06	8th January
40. Jones	Elsie	27B, Ashburton Road	85299	26th Nov., '32	10th January
41. Kean	Lucy Rowe	133, Eastfield Road	31908	30th Sept., '10	9th January
42. Lee	Ethel Eliza	23, Derby Road	60963	11th Aug., '23	9th January
43. Legge	Amelia Vine	49, Victoria Road North	58948	13th Dec., '22	10th Sept.
44. Littler	Alice	16, Elmwood Road, Hilsea	44965	31st Oct., '16	4th February
45. Lovett	Ellen	14, Shearer Road	48431	10th Feb., '19	8th January
46. Malyon	Marion	200, Stamshaw Road	46160	11th Aug., '17	13th January
47. Martin	Elizabeth Amy	22, Milton Road	56977	10th April, '22	9th January
48. Morey	Henrietta C. M.	"Inglenook," Havant Road, Cosham	35040	19th Dec., '11	10th January
49. Morgan	Agnes	68, Montgomery Road	44981	31st Oct., '16	9th January
50. Nicholson	Maud Louisa	42, Dumbarton Street	93925	17th Aug., '35	14th February
51. Packer	Mabel Elizabeth	7, St. Andrew's Road	48091	9th Nov., '18	10th January
52. Paul	Margaret	46, Derby Road	35805	2nd May, '12	9th January
53. Pavier	W. G.	Royal Naval Maternity Home	78458	24th May, '30	9th January
54. Phillips	Edith	80, Methuen Road	3388	24th Mar., '04	8th January
55. Pumphrey	Catharine E. V.	53, Laburnum Grove	94791	23rd Nov., '35	28th February
56. Richards	Annie Kathleen	Royal Naval Maternity Home	35480	21st Feb., '12	9th January
57. Ricketts	Marion F.	454, Commercial Road	8755	27th Oct., '04	11th January
58. Rumbold	Edith	"Burcott," Northern Road, Cosham	49421	9th Aug., '19	10th January
59. Rust	Jane	204, Powerscourt Road	40133	28th April, '14	10th January
60. Sansom	Maud Mary	46, Tottenham Road	40579	22nd June, '14	9th January
61. Sivell	Barbara Lilian	Royal Naval Maternity Home	95607	22nd Feb., '36	14th July
62. Stallworthy	Lydia Helen	454, Commercial Road	64077	August, '24	12th January
63. Stevens	Johanna	226, Stubbington Avenue	55569	10th Oct., '21	12th January
64. Street	Beryl	9, Clovelly Road	38035	28th April, '13	8th January
65. Taylor	Florence Mary	"St. Hilda," Portsmouth Rd., Portch't'r	29219	10th Aug., '09	13th February
66. Taylor	Lily May	3, Posbrooke Road	18246	27th April, '05	25th January
67. Trowbridge	Edith Mary	1, Collins Road	22860	28th Nov., '05	9th January
68. Webley	Joan	Royal Naval Maternity Home	96499	23rd May, '36	9th July
69. Weller	Marion Edith	45, Catisfield Road	46669	10th Nov., '17	8th January
70. Willcocks	May Julia	174, Chichester Road	57158	10th April, '22	21st January
71. Winfield	Gladys Irene	2, Copythorn Road	74978	23rd Feb., '29	10th January
72. Wynn	Amelia	69, Solent Road, Drayton	35371	19th Feb., '12	10th January

PUERPERAL FEVER AND PYREXIA.—During the year there were 57 (61) notifications of Puerperal Fever and Puerperal Pyrexia.

Immediate investigation was made into every case in order that every precaution should be taken to prevent the spread of infection. Where deemed advisable, the midwife attending the case was suspended from practice until it was clear that there was no further danger of infection being passed to other patients. In this connection, nose and throat swabs were, where indicated, taken from the midwife and from any other persons who had assisted in nursing the patient, and were forwarded either to Dr. Radcliffe at the Royal Hospital or the Ministry of Health Laboratory for examination for the presence of haemolytic streptococci. By means of these investigations it was made possible in most cases to trace the sources of infection and an analysis of these is given below :—

Puerperal Sepsis	.....	.....	.....	36
Influenza	.....	.....	.....	2
Pneumonia	.....	.....	.....	3
Toxaemia	.....	.....	.....	2
Pyelitis	.....	.....	.....	2
Acute yellow atrophy of the liver	.....	.....	.....	1
Mastitis	.....	.....	.....	5
Acute nephritis	.....	.....	.....	1
Acute rheumatism	.....	.....	.....	1
Tonsillitis	.....	.....	.....	2
Pyosalpinx	.....	.....	.....	1
Phlebitis	.....	.....	.....	1

No outbreak of Puerperal Fever occurred.

WEARING OF MASKS.—Masks are still being issued to the midwives in the City for use when attending patients during confinement and when making subsequent dressings, as a safeguard against the spread of infection.

BIRTH CONTROL.—Advice on Birth Control methods is given at the various Ante-natal and Post-natal Clinics in those cases where pregnancy would be detrimental to health, in accordance with Ministry of Health Memorandum 153/MCW.

During the year the Council renewed their permission to the Portsmouth Branch of the British Birth Control Association to use part of the premises of the old Maternity Hospital as a Birth Control Clinic. The original application was granted for a period of six months and this has been extended for a further twelve months.

COMPENSATION TO MIDWIVES.—9 (18) Midwives were suspended from practice on account of contact with infection, and were compensated in accordance with Section 2 of the Midwives Act, 1926.

MATERNITY AND NURSING HOMES.—There are 48 Maternity and Nursing Homes registered under the provision of the Nursing Homes Registration Act, 1927. Applications for registration during the year were as follows :—

(1) Number of applications for Registration :	1936	1935
(a) As Nursing Homes	5	4
(b) As Maternity Homes	2	3
(2) Number of Homes registered :		
(a) As Nursing Homes	5	2
(b) As Maternity Homes	1	3
(3) Number of orders made refusing registration	Nil	Nil
(4) Number of applications for exemption from registration	Nil	Nil
(5) Number of applications for registration withdrawn	1	2

All registered nursing and maternity homes have been periodically inspected and found to be maintained in good order.

ANTE-NATAL AND POST-NATAL CLINICS.—The following table gives details of the work carried out at the Council's Ante-natal and Post-natal Clinics during the year :—

Clinic	ANTE-NATAL				POST-NATAL			
	No. of Patients		Attendances		No. of Patients		Attendances	
	1936	1935	1936	1935	1936	1935	1936	1935
Fratton (one Clinic weekly)	282	370	650	629	25	3	25	4
Cosham (one Clinic weekly) (From 16-6-36)	53	—	120	—	4	—	4	—
Saint Mary's Hospital (four Clinics weekly)	1114	751	6672	3604	260	64	454	77
TOTALS	1449	1121	7442	4233	289	67	483	81

The number of patients attending Ante-natal Clinics in Portsmouth represents 52.03% (48.75%) of the women confined during the year.

TABLE XXXVIII.

	SAINT MARY'S HOSPITAL	ROYAL NAVAL MATERNITY HOME
No. of Maternity beds (exclusive of isolation and labour)	70	21
No. of Patients admitted	756	347
Average duration of stay	14 days	16 days
No. of cases delivered by :		
(a) Midwives	690	295
(b) Doctors	66	36
Cases in which medical assistance was sought by midwife	152	Doctor always available
No. of cases notified as :		
(a) Puerperal Fever	Nil	Nil
(b) Puerperal Pyrexia	9	8
No. of cases of pemphigus neonatorum	Nil	Nil
No. of infants not entirely breast-fed while in institution	31	48
No. of cases notified as ophthalmia neonatorum	4	4
Result of treatment	3 Recovered 1 Became blind	Recovered
No. of Maternal deaths	6	Nil
Cause of death	1. Septic Broncho-pneumonia ; Acute Gangrenous Pharyngitis ; Eclampsia. 2. Air embolism 3. Shock and Haemorrhage ; Ruptured uterus ; Placenta praevia 4. Eclampsia 5. Paralytic Ileus ; Caesarean Section for Placenta Praevia 6. Puerperal Pyaemia	
No. of foetal deaths :		
1. Stillborn	41	6
2. Within 10 days of birth	21	11
3. Causes of death	Placenta Praevia 6 Pre-Eclamptic Toxaemia 5 Ditto and Ante-partum Haemorrhage 3 Prematurity and Ante-partum Haemorrhage 1 Concealed and Ante-partum Haemorrhage 3 Eclampsia 4 Prolapsed Cord 2 Anencephaly 4 Hydrocephaly 1 Obstructed labour 5 White Asphyxia 2 Atelectasis 4 Shoulder presentation 1 Maternal Paroxysmal tachycardia 1 Maternal pneumonia 1 Postmaturity 1 Prematurity 9 Pneumonoccal Meningitis 1 Congenital Atresia of Small Intestine 1 Shock, Prematurity, Caesarean Section, Placenta Praevia 3 Cerebral Haemorrhage, Precipitate labour 1 Broncho-pneumonia 1 The Haemorrhagic Disease 1 Cause unknown 1	Prematurity 5 Prematurity—degenerate placenta 2 Macerated foetus 1 Acute toxaemia of mother 1 Cerebral Haemorrhage 2 Ante-partum Haemorrhage 2 Congenital heart disease 1 Hydrocephaly 2 Cause unknown 1

REPORT ON THE WORK OF THE CHILD WELFARE SERVICE.

By T. ERNEST ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.),
Child Welfare Officer.

HOME VISITING.—The Health Visitors paid 29,782 (26,640) visits during the year ; 3,757 (3,724) were first visits to infants under one year of age, 12,768 (12,811) were to children between the ages of one and five years, and 267 (244) to expectant mothers. The visits also included those to 9 (18) cases of puerperal fever, to 48 (43) cases of puerperal pyrexia, and to 21 (15) cases of ophthalmia neonatorum.

CHILD WELFARE CENTRES.—The various child welfare centres showing the number of new patients, attendances, etc., are set out below :—

CENTRES	Attendances	New Patients	Seen by the Medical Officer
Fratton (2 afternoons a week)	12,333	1,022	3,350
Eastney (1 afternoon a week)	9,472	422	1,632
Portsea (1 afternoon a week)	5,338	264	2,035
Stamshaw (1 afternoon a week)	5,759	325	1,733
Cosham (1 afternoon a week)	6,185	292	1,498
Copnor (1 afternoon a week)	6,167	387	1,542
Totals	45,254	2,712	11,790
Totals for 1935	37,557	2,227	12,387

Dried milk was issued from the Child Welfare Centres to 1,720 (1,425) applicants—171 (201) expectant mothers, 535 (496) nursing mothers and 1,014 (728) infants—at a total cost of £4,006 (£4,035). Of this sum £1,520 (£1,281) was recovered from the patients.

THE PRE-SCHOOL CHILD.—The scheme detailed in the Report for 1935, which provided for the appointment of two additional Health Visitors and the more complete visitation of children between one and five years of age, resulted in an increase for that year of 4,834 visits to “pre-school” children. The total visits made in respect of the year 1936 to children of this age group amounted to 12,768, compared with 3,757 to infants in the first year of life. Records are now being kept whereby home visits and attendances at Child Welfare Centres, will in future be classified so far as they concern children (a) under one year, (b) 1—2 years, and (c) 2—5 years of age, so that the term “pre-school child” may be restricted to this last group.

The new Child Welfare Clinic at St. Alban's Hall, Copnor Road, which was opened on 7th November, 1935, has proved most popular with mothers of that district, as will be seen from the Table of Attendances in the preceding section. As an experiment parents were asked to bring pre-school children, whose homes had been visited, for examination to the nearest local Centre, at the usual clinic hours, and on the whole the response has been satisfactory, children being brought in most cases when some evident defect required advice or treatment, but few attendances have been made solely for medical overhaul of an apparently normal child.

The arrangements for medical examination of pre-school children have been further developed by the opening of a special “Toddlers' Clinic,” on 24th June, 1936, at the Central Child Welfare Centre, Trafalgar Place. This is held weekly on Wednesday afternoons and the attendances, etc., for the year 1936 were as follows:—

<i>Number of Clinics</i>	<i>New Patients</i>	<i>Attendances</i>	<i>Seen by Medical Officer</i>
24	134	273	236

Under the arrangements made with the Education Committee for the treatment of pre-school children, and indeed, infants of any age from birth up to five years, at School Clinics,

cases are referred by the Medical Officers from Child Welfare Centres or from the Toddlers' Clinic for such conditions as external eye disease, skin disease, ringworm of the scalp, ear discharge, squint and orthopaedic defects. Cases requiring operation for tonsils and adenoids or more serious ear conditions are referred to Saint Mary's Hospital or the Eye and Ear Hospital.

Nutritional defects, including cases of rickets, are remedied by advice to the parents and the supply of special foods such as chocolate milk, Virol, Maltoline, Aberdeen Emulsion, etc. In a few instances treatment by ultra-violet light has been arranged at Saint Mary's or the Royal Portsmouth Hospital.

CHILDREN'S ACTS, 1908—1932.—Under these Acts, 126 (113) persons had notified the Local Authority at the beginning of the year that they had undertaken the maintenance of infants apart from their parents, and the number of infants so maintained was 196 (158). At the end of the year the figures were 123 (126) persons and 194 (196) children. During the year 1,702 (1,540) visits were paid by the Infant Protection Visitor to the various homes, which were, generally speaking, found to be satisfactory and the children well cared for. A number of applications to maintain children under the Act were refused for reasons such as old age, uncleanness and overcrowding. There were no prosecutions during the year.



SANITARY CIRCUMSTANCES

(Figures for the previous year are included
in brackets for comparative purposes).

SANITARY CIRCUMSTANCES.

WATER SUPPLY.—There is nothing to add to previous reports in respect of the water supply. Periodical analysis by the City Analyst, the results of which are given on page 132, show that the usual high standard of purity is maintained.

PUBLIC CLEANSING.—I am indebted to Mr. S. Allchurch, the Transport Superintendent, for the following Report :—

“ The year 1936-37 has seen further improvements in the Public Cleansing Service, particularly with regard to equipment.

Two new Compactor type side loading 13 cube yard, and one Compressmore Van type 18 cube yard machines have been provided, and one of the old seven cube yard side loading rigid type has been converted into an articulated rear and front loading Compressmore type with body capacity of 21 cube yards. The conversion has increased the carrying capacity to three times the original in addition to providing rear and front loading, which is highly desirable owing to traffic conditions and public hygiene. It is hoped that the remaining four seven cube yard machines will be converted during 1937-38. This should reduce costs and facilitate collection.

Refuse disposal is by controlled tipping and the filled-in areas are now being adapted for use as recreation grounds and allotments.

There has been a noticeable improvement in the number of sanitary dust-bins in use and this is a welcome sign of the times and may be in a measure the result of the Civic Cleansing Campaign.

Two new mechanical sweeper collectors for street cleansing have been purchased and put into use and with the increased number of improved types of litter receptacles, street littering appears to have diminished to a great extent. This is proved by the need for frequent attention having to be given to the clearing of the receptacles.

Several of the cleansing vehicles have been fitted with attachments for fire fighting and decontamination for Air Raid Precautions duties and this section of the Department's activities is making good progress.

The year marks a definite step forward in matters relating to the Public Cleansing Service."

MUNICIPAL DISINFECTING FLUID.—7,320 (7,840) gallons of electrolysed sea-water disinfecting fluid were manufactured at the Municipal Disinfecting Fluid plant during the year. Of this amount 2,528 (2,921) gallons were issued to the public, 1,480 (1,100) gallons to the public elementary schools, 2,060 (2,060) gallons to the Public Swimming Baths, 460 (420) gallons to the Children's Home Swimming Bath, 480 (520) gallons to Langstone Sanatorium, 180 (150) gallons to Saint Mary's Hospital, 20 (40) gallons to Saint Mary's Institution, and the remainder to various other institutions.

WATER OF SWIMMING BATHS AND POOLS.
—The new Hilsea Swimming Bath, opened during 1935, has a capacity of 529,000 gallons, the sea water being pumped from the adjacent creek. An up-to-date filtration and purification plant was installed enabling a turnover of the water in the bath to be obtained once every six hours. Samples of water taken for bacteriological and chemical analysis proved satisfactory.

There are no privately owned swimming baths or pools in the City.

OTHER DEFECTS.—*continued.*

Workshop roofs repaired	....	....	....	....	....	....	....	2
Workshops or parts of Workshops repaired	....	....	....	....	....	....	....	12
Cooking ranges or firegrates repaired or renewed	....	....	....	....	....	....	....	270
Coppers repaired or renewed	....	....	....	....	....	....	....	79
Other nuisances in dwelling-houses abated	....	....	....	....	....	....	....	470

OFFENSIVE MATTER, &c.

Manure and refuse removed	....	....	....	....	....	....	....	15
Stagnant water removed	....	....	....	....	....	....	....	2
Animals removed	....	....	....	....	....	....	....	2
Bedding cleansed or destroyed	....	....	....	....	....	....	....	—

SLAUGHTERHOUSES, STABLES, &c.

Yards, stables, sties, etc., cleaned	....	....	....	....	....	....	....	5
Bakehouses cleansed	14

BYELAWS.

Notices under Nuisance Bye-laws complied with	2
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GENERAL INSPECTION.

DWELLING HOUSES.—7,714 (7,856) dwelling houses were inspected, and 18,688 (16,297) re-inspections were made whilst work ordered to be carried out was in progress.

COMPLAINTS.—2,156 (1,976) complaints were made at the office and received attention.

COMMON LODGING HOUSES.—85 (97) visits were made to the 4 (6) registered Common Lodging Houses.

WORKSHOPS.—501 (516) visits were made to the Workshops, which have been well kept, and 137 (132) visits to out-workers' premises. 5 Complaints were received from H.M. Inspector of Factories, all of which received attention.

OLD DRAINS.—1,090 (1,005) old drains were tested or re-tested.

NEW SANITARY FITTINGS.—2,693 (2,661) sanitary fittings were examined.

OCCUPATION CERTIFICATES.—994 (1,036) Occupation Certificates were issued with respect to new buildings.

SANITARY CERTIFICATES.—15 (4) Sanitary Certificates with respect to the sanitary condition of the drains and fittings of old dwelling houses have been issued.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) AMENDMENT ACT, 1933.—Under this Act, 4 (10) certificates relating to dwelling houses not being kept in a reasonable state of repair were granted to tenants.

RATS AND MICE (DESTRUCTION) ACT.—664 (366) visits were made to rat infested premises, and 1 (2) notice was served.

INFECTIOUS DISEASES.—1,557 (1,597) cases of infectious diseases were visited and investigated, and 1,015 (1522) rooms were disinfected by the disinfector.

FACTORIES AND WORKSHOPS.—The following tables give particulars of inspections, defects discovered, and action taken in connection with the supervision of factories, workshops and workplaces :—

TABLE XXXVIII.

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries)	133	8	—
Workshops (including Workshop Laundries)	501	17	—
Workplaces (other than Outworkers' premises)	89	3	—
TOTAL	723	28	—

DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars	Number of Defects.			Number of offences in respect of which Prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
(1)	(2)	(3)	(4)	(5)
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness	19	19	—	—
Want of Ventilation	1	1	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors	—	—	—	—
Other Nuisances	10	9	—	—
Sanitary accommo- dation { insufficient	1	1	—	—
{ unsuitable or defective	3	1	—	—
{ not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshops Acts</i>				
Illegal occupation of underground bake- house (s. 101)	1	1	—	—
Other Offences (Excluding offences relating to out- work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921	—	—	—	—
TOTAL	35	32	—	—

HOMework.

Lists received twice a year from Employers	....	....	....	....	46
Number of Outworkers : Contractors	....	....	....	....	40
Workmen	....	....	....	....	257
Lists received once a year	....	....	....	....	9
Number of Outworkers : Contractors	....	....	....	....	11
Workmen	....	....	....	....	12
Outwork in unwholesome premises	....	....	....	....	—
Notices served	....	....	....	....	—
Outwork in infected premises	....	....	....	....	2

REGISTERED WORKSHOPS.

WORKSHOPS ON REGISTER AT END OF YEAR										Number
Retail Bakehouses	....	....	....	....	....	....	....	....	42
Tailoring	....	....	....	....	....	....	....	....	106
Dressmaking and Millinery	....	....	....	....	....	....	....	....	72
Upholstery	....	....	....	....	....	....	....	....	24
Laundries	....	....	....	....	....	....	....	....	12
Photography	....	....	....	....	....	....	....	....	17
Miscellaneous	....	....	....	....	....	....	....	....	307
TOTAL									580

INSPECTION AND SUPERVISION OF FOOD

(Figures for the previous year are included
in brackets for comparative purposes).

MILK AND DAIRIES.

MILK SUPPLY.

During the year 2,285 visits were made to the registered Dairies, Cowsheds and Milkshops. There are 964 retail purveyors, 16 wholesale dealers in milk, and 3 cowkeepers carrying on business in the City, and these premises have all been well kept.

The number of samples of milk taken was 645, of which 21 were found to be deficient in milk fat and 18 found to be deficient in solids-not-fat. Fines were imposed in five cases, two were dismissed on payments of costs, while three were cautioned.

For filling milk bottles in the street (two offences) a dairyman was fined £1 on each offence under the Milk and Dairies Order, 1926.

GRADED MILK.—From January 1st, 1936 to May 31st, 1936, 6 licences were issued for the sale of Certified Milk, 13 for the sale of Grade A (Tuberculin Tested), 13 for the sale of Grade A and 9 for the sale of Pasteurised Milk.

On June 1st the Milk (Special Designations) Order, 1936, revoked the previous Orders of 1923 and 1934 prescribing new Grades and abolishing the existing designations “Certified,” “Grade A (Tuberculin Tested)” and “Grade A.” The new designations are (“Tuberculin Tested”), “Accredited,” “Tuberculin Tested (Pasteurised)” and “Pasteurised.”

Tuberculin Tested Milk (Pasteurised) is not a designation in respect of which a licence is granted and a person selling milk under this description must obtain separate licences in respect of the use of the two designations “Tuberculin Tested” and “Pasteurised.”

Arrangements were made in the New Order for Licences issued during the first five months of the year in respect of "Certified" Milk and "Grade A (Tuberculin Tested)," to be deemed to be licences to use "Tuberculin Tested" Milk," and those issued in respect of "Grade A" Milk to be deemed to be licences to use "Accredited Milk." During the remainder of the year no applications were received for any of the new licences.

During the year 191 samples of milks of special designation were examined by the Public Analyst, details of which are contained in his Annual Report (pages 120 to 123). In only 20 samples did the milk fail to pass the required tests.

Under the Milk Act, 1934, a fine of £2 was imposed for using a special designation relating to milk in an unlawful manner.

GUINEA PIG TESTS.—In addition to the samples of milk submitted to the Public Analyst, 8 samples of ordinary and graded milks were forwarded to the Clinical Research Association, London, for examination for the presence of tubercle bacilli. The ingestion of these bacilli in milk is the cause of a large proportion of the cases of tuberculosis in children, especially of the bones, joints and abdomen. In all cases the examination of the Guinea pig failed to show the presence of tubercle bacilli.

MILK SUPPLIED TO SCHOOLS.—In connection with the scheme for the supply of milk to school-children which was inaugurated by the Education Committee at the beginning of the year, 81 samples of milk were taken from 6 retailers of pasteurised milk. Of these 9 were reported by the Public Analyst not to be in accordance with standard. The retailers were cautioned by the Medical Officer of Health, and after repeated cautions one was finally removed from the list of Contractors. No prosecutions took place.

FOOD AND DRUGS.

FOOD & DRUGS (ADULTERATION) ACT, 1928.

The total number of samples of food and drugs taken for analysis during the year was 1,310, of which 46, or 3.5% were adulterated as compared with 3.0% for the previous year. Despite the increase the percentage adulterated is still below the average for the past five years for England and Wales (5.98%).

ACTION TAKEN.—Of the 46 adulterated samples 21 were formal samples, of which 5 were cautioned. In two cases no proceedings were instituted, for after visiting the farms and seeing the cows milked it was found that the milk did not come up to the legal standard. In regard to the remaining 14 samples, proceedings were instituted with the following results:—In 7 cases the summonses were dismissed, the magistrates being satisfied that the milk sold was as drawn from the cows. In the other 7 cases fines and costs were inflicted ranging from £1 to £5. In one case, *i.e.* Camphorated Oil, 19% deficient in Camphor, the information was dismissed on payment of costs £3 7s. 0d., and an employee was fined £5 for impeding the Sampling Officer in the execution of his duty.

Details of the samples adulterated are given by the Public Analyst in Tables A and B of his Report (pages 117 and 118). The following outstanding case of adulteration is of interest.

ARSENICS IN PEARS.—Information was received from the Medical Officer of Health of the City of Westminster that two boxes of pears had been despatched to a retailer in Portsmouth. The consignment was immediately held up pending investigation. Samples were submitted to the Public Analyst for examination and found to be infected with arsenic. It was ascertained that the arsenic could be completely removed by careful wiping with a wet chamois leather. This procedure was carried out under the supervision of the Sampling Officer

and, after further samples were found by examination to be satisfactory, the pears were released for sale by the M.O.H.

DRUGS.—Of 59 (43) samples of drugs examined by the Public Analyst, two of Camphorated Oil were found to be deficient in Camphor.

In addition to samples of drugs examined by the Public Analyst, 33 (33) drug tests, chiefly mixtures, were carried out by the City of Portsmouth Insurance Committee, the examinations being made by a London firm of analysts nominated by the Ministry of Health. Four (two) samples were found to be below standard of careful dispensing and fines of £1 were imposed in three cases, one chemist being cautioned. The above information has been kindly supplied by the Clerk to the Insurance Committee.

MERCHANDISE MARKS ACTS, 1926, AND AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.

Under the above Acts, Orders in Council have been made in relation to the marking of the following imported foodstuffs : Fresh Apples, Raw Tomatoes, Eggs (hen or duck eggs in shell), Dried Eggs, Oat Products (Oatmeal, Rolled Oats, Oat Flour and Groats), Currants, Sultanas, Raisins and Honey, Frozen or Chilled Salmon or Sea Trout, Butter, Dead Poultry (ducks, fowls, geese or turkeys, whether dressed or undressed), Bacon and Hams. During the year 1,649 (1,598) visits were paid to various shops to ensure compliance with the provisions of the above Orders. A large number of traders were cautioned by the Inspector.

REGULATION OF MANUFACTURE AND SALE OF ICE CREAM.

Under the provisions of Section 92 of the Portsmouth Corporation Act, 1931, and Section 115 of the Portsmouth Corporation Act, 1920 :—

125 (71) persons were registered as vendors,

6 (8) persons were registered as manufacturers.

Ice cream is a most valuable article of food, the consumption of which in this country is rapidly increasing. It is important, therefore, to ensure a pure and wholesome supply. This is rendered difficult by the fact that ice cream like milk forms a most favourable breeding ground for bacteria, which gain ready access to the ingredients of the "mix" and of the ice cream product through contact with unclean hands, through the medium of spray from the coughing or sneezing of the attendant, through dirty plant and equipment and through dust and splashings from unclean surroundings.

Bacteria contaminated ice cream is not only a source of danger to the public health and the cause of many fatal epidemics, but from the commercial point of view contamination produces off-flavours and odours and impairs the keeping qualities of ice cream.

In my 1934 Report I summarised a copy of "Instructions on the Prevention of Bacterial Contamination," embodying the results of the most recent scientific investigation and research, which I circulated to each manufacturer and vendor of ice cream in the City. At the same time District Sanitary Inspectors were directed to pay particular attention to all registered premises in their districts.

It is gratifying to be able to report that 9 samples of ice cream taken during the year under review show a continued improvement (see Public Analyst's Report, page 124). Further efforts are being made to produce still greater improvement.

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD.

This is carried out by the Public Analyst at the Laboratory in Arundel Street (*vide* the Public Analyst's Report, pages 115 to 132). The arrangements described in my Report last year to relieve the increasing congestion of work at the Laboratory have resulted in a reduction of diphtheritic swabs examined by the Public Analyst from 6,332 in 1935 to 2,041 in 1936. The difference, *i.e.* 4,291, were dealt with in the new Hospital Laboratory at the Infectious Diseases Hospital by the Resident Medical Officers. The examination of swabs from Medical Practitioners in the City is still carried out by the Public Analyst.

The Public Analyst's Report.

THE CHEMICAL LABORATORY,
16, ARUNDEL STREET,
PORTSMOUTH.

*The Chairman and Members of the
Health and Housing Committee.*

Madam and Gentlemen,

I beg to submit my Report on the work carried out in my Department during the year ending 31st December, 1936.

Attention may be called to the increased number of samples taken in connection with the Food and Drugs Act, due largely to the diminished number of Swabs received for Diphtheritic examination, which has resulted from the establishment of a Laboratory at the Infectious Diseases' Hospital.

The percentage of detected adulteration is slightly higher than for the previous year, but is lower than that of the average for England and Wales.

I wish to express my appreciation of the work of Mr. C. M. Beckett and Mr. E. G. Whittle, B.Sc., A.I.C., and of the manner in which Inspector Sinnett carries out his duties at all times.

I remain, Madam and Gentlemen,

Your obedient Servant,

REGINALD P. PAGE,
Public Analyst.

REPORT OF THE PUBLIC ANALYST.

During the year ending 31st December, 1936, the number of samples and specimens examined was 4,212, which may be briefly summarised as follows :—

	1936	1935
Food and Drugs Act	1,310	1,229
Graded Milks	191	187
Samples taken at Farms	—	66
Water	25	27
Sewage and Sewage Effluents	564	528
Police and Coroner	27	14
Miscellaneous	54	52
Diphtheritic Material	2,041	6,332
Total	<u>4,212</u>	<u>8,435</u>

The number of samples taken in connection with “ The Sale of Food and Drugs Act ” is 1,310. This gives an average of one sample for every 191 persons in the City, or a “ Sample Rate ” of 5.2 samples per 1,000 persons.

The nature of samples analysed, the number adulterated or of inferior quality, is shown in the following table :—

TABLE A.

Nature of Sample	Number Examined	Number Genuine	Number Inferior	Number Adulterated	Percentage Adulterated
Milk	645	589	17	39	6.0
Butter	111	111	—	—	—
Margarine	51	50	1	—	—
Lard	6	6	—	—	—
Cookeen	1	1	—	—	—
Coffee	55	55	—	—	—
Cocoa	42	42	—	—	—
Tea	30	30	—	—	—
Sugar	18	18	—	—	—
Demerara Sugar	3	3	—	—	—
Lemon Curd	7	7	—	—	—
Jam	10	10	—	—	—
Marmalade	5	5	—	—	—
Pepper	34	34	—	—	—
Mustard	14	14	—	—	—
Pearl Barley	19	17	—	2	10.5
Rice	29	29	—	—	—
Ground Rice	15	15	—	—	—
Dried Fruits	11	11	—	—	—
Ground Ginger	3	3	—	—	—
Cheese	8	8	—	—	—
Sauce	2	2	—	—	—
Chocolate	1	1	—	—	—
Ground Almonds	6	6	—	—	—
Raisins	8	8	—	—	—
Sultanas	8	8	—	—	—
Candied Peel	4	4	—	—	—
Glace Cherries	5	5	—	—	—
Crystallised Cherries	4	4	—	—	—
Crystallised Fruits	3	3	—	—	—
Mincemeat	4	4	—	—	—
Sausages	4	4	—	—	—
Sild	1	—	—	1	100
Baking Powder	2	2	—	—	—
Vinegar	9	8	—	1	11.1
Ice Cream	9	9	—	—	—
Cheese and Tomato Sandwich					
Spread	1	1	—	—	—
Fruit Squash	5	5	—	—	—
Cider	2	2	—	—	—
Wines	4	3	—	1	25
Whiskey	48	48	—	—	—
Gin	4	4	—	—	—
Olive Oil	6	6	—	—	—
Camphorated Oil	9	7	—	2	22.2
Castor Oil	7	7	—	—	—
Health Salts	4	4	—	—	—
Tincture of Iodine	4	4	—	—	—
Boracic Ointment	5	5	—	—	—
Zinc Ointment	3	3	—	—	—
Liquorice Powder	3	3	—	—	—
Ammoniated Tincture of					
Quinine	3	3	—	—	—
Bismuth Lozenge	3	3	—	—	—
Seidlitz Powder	3	3	—	—	—
Malt and Cod Liver Oil	5	5	—	—	—
Malt Extract	4	4	—	—	—
Total	1310	1246	18	46	3.5

TABLE B.
ADULTERATED SAMPLES.

No.	Nature of Sample			Nature of Adulteration	Observation
65	Milk	....	....	3.6% Added Water	Fined £1
81	Milk	....	....	5.8% Added Water	Fined £1
196	Milk	....	....	25.6% Added Water	Test Sample, Private Person
197	Milk	....	....	29.1% Added Water	Test Sample
198	Milk	....	....	30.0% Added Water	Fined £1 and 17/6 Costs
202	Milk	....	....	25.6% Added Water	Test Sample
205	Milk	....	....	13.3% Deficient in Milk Fat	Cautioned by M.O.H.
208	Milk	....	....	30.0% Deficient in Milk Fat	Taken at Farm after seeing cows milked
261	Pearl Barley	....	....	1% Extraneous Mineral Matter	Test Sample
313	Pearl Barley	....	....	1% Extraneous Mineral Matter	Cautioned by M.O.H
351	Milk	....	....	8.9% Added Water	Test Sample
354	Milk	....	....	3.6% Added Water	Test Sample
355	Milk	....	....	3.1% Added Water	Test Sample
356	Milk	....	....	3.6% Added Water	Test Sample
357	Milk	....	....	10.5% Added Water	Test Sample
360	Milk	....	....	10.8% Added Water	Fined £2 and £1 2s. Costs
361	Milk	....	....	3.1% Added Water	Fined £1 and £1 1s. Costs
448	Milk	....	....	11.1% Added Water, and 23.9% Deficient in Milk Fat	Test Sample, Private Person
504	Milk	....	....	8% Deficient in Milk Fat	} Cases proved, Information dismissed on payment of Costs £2 14s. 6d.
505	Milk	....	....	6% Deficient in Milk Fat	
506	Milk	....	....	10% Deficient in Milk Fat	
514	Milk	....	....	13.3% Deficient in Milk Fat	Test Sample, Private Person
515	Milk	....	....	11% Deficient in Milk Fat	Test Sample
525	Milk	....	....	5% Deficient in Milk Fat	Test Sample, Grade A (TT) Milk
538	Milk	....	....	9% Deficient in Milk Fat	Cautioned by M.O.H.
621	Milk	....	....	7.5% Added Water	Test Sample, School Milk, Cautioned by M.O.H.
648	Milk	....	....	12% Deficient in Milk Fat	Test Sample, Private Person
650	Milk	....	....	8% Deficient in Milk Fat	} Summons dismissed, Magistrates satisfied that milk sold was as drawn from the cow
651	Milk	....	....	16% Deficient in Milk Fat	
652	Milk	....	....	23% Deficient in Milk Fat	
653	Milk	....	....	12% Deficient in Milk Fat	
654	Milk	....	....	15% Deficient in Milk Fat	
656	Milk	....	....	5% Deficient in Milk Fat	
657	Milk	....	....	7% Deficient in Milk Fat	
666	Milk	....	....	6.1% Added Water	Test Sample, Private Person
749	Milk	....	....	6% Deficient in Milk Fat	Test Sample
750	Milk	....	....	6% Deficient in Milk Fat	Test Sample
797	Sild	....	....	3.5 grains of Tin per lb.	Test Sample
874	Vinegar	....	....	10% Deficient in Acetic Acid	Cautioned by M.O.H.
938	Milk	....	....	8% Deficient in Milk Fat	Test Sample, Private Person
954	Milk	....	....	30% Deficient in Milk Fat	Test Sample, Grade A (TT) Milk
1092	Camphorated Oil			19% Deficient in Camphor	Test Sample
980	Accredited Milk			Failure to comply with Milk (Special Designation Orders) 1934	Fined £2
1099	Camphorated Oil			19% Deficient in Camphor	Case proved, Information dismissed on payment of Costs £3 7s. 0d. Also an Employee was fined £5 for impeding the Sampling Officer in the execution of his duty
1206	Milk	....	....	16.4% Added Water	Test Sample, Private Person
1207	Milk	....	....	10.6% Added Water	Test Sample, Private Person
1210	Orange Wine	....	....	620 parts of Benzoic Acid per million	Test Sample

The Fines, including Costs, amounted to £22 2s. 0d.

TABLE C.

Showing the total number of samples analysed and the number adulterated during the last five years :—

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1932	1,233	40	3.2
do.	1933	1,246	41	3.2
do.	1934	1,253	23	1.9
do.	1935	1,229	38	3.0
do.	1936	1,310	46	3.5
ENGLAND AND WALES	1935	143,831	7,972	5.5

MILK.

The following table gives the statistics of the adulteration of Milk during the last five years :—

TABLE D.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1932	580	20	3.4
do.	1933	580	28	4.8
do.	1934	522	14	2.5
do.	1935	566	30	5.3
do.	1936	645	39	6.0
ENGLAND AND WALES	1935	78,674	5,798	7.4

TABLE E.

Showing the average amount of Milk Fat and of Solids-not-Fat for each month during the year :—

Month	Milk Fat	Solids-not-Fat	Total Solids	Number of Samples examined
January	4.02	9.04	13.06	67
February	3.87	8.97	12.84	62
March	3.77	8.80	12.57	68
April	3.77	8.98	12.75	55
May	3.79	8.92	12.71	56
June	3.61	8.79	12.40	58
July	4.23	8.85	13.08	57
August	3.85	8.96	12.81	29
September	4.02	8.92	12.94	48
October	3.94	9.01	12.95	52
November	4.12	9.04	13.16	48
December	4.13	8.98	13.11	47
Average 1936	3.92	8.94	12.86	647
„ 1935	3.77	8.97	12.74	529
„ 1934	3.98	9.00	12.98	360

These averages should be viewed from the standpoint of the Government standard for Milk which is 3.0 per cent. of Fat and 8.5 per cent. of Solids not Fat.

FARMERS' SAMPLES.

Sixty-four samples of Milk were taken during the year, representing the milk supplied to Retailers of the City, and of these, fifteen were found to be adulterated. In two cases no proceedings were instituted, for after visiting the farm and seeing the cows milked, it was found the milk did not come up to the Legal Standard. In seven cases Legal Proceedings were instituted, in each case the Summons was dismissed, the Magistrates being satisfied that the milk sold was as drawn from the cow. In the other six cases Legal Proceedings were instituted and fines with Costs amounting to £9 15s. 0d. were inflicted.

MILK SUPPLIED TO LOCAL INSTITUTIONS.

Sixty-two samples were obtained from St. Mary's Hospital, Kingston Prison, and the various Hospitals and Institutions in the City, and of these one was found to be adulterated. A letter of caution was sent by the Medical Officer of Health.

AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.

Merchandise Marks Act, 1926 and Orders in Council made thereunder. During the year 1,649 visits were made to business premises to see that the provision of these Orders are being complied with. Twenty-four shopkeepers have been cautioned during the year for not complying with the various Orders. Otherwise it has been found that these Orders are being complied with by the numerous tradesmen in the City in a satisfactory manner.

DESIGNATED MILK.

During the year under review important changes have taken place in connection with milk sold under a special designation.

The Milk (Special Designation) Order which came into force on 1st June, 1936, revoked the previous Orders of 1923 and 1934.

The existing Designations "Certified," "Grade A (Tuberculin Tested)" and "Grade A" were abolished. "Certified" and "Grade A (Tuberculin Tested)" Milks were grouped under one Designation as "Tuberculin Tested" Milk, whilst "Grade A" Milk is now, under the new Order, "Accredited Milk."

As a result there has been no such product as "Certified Milk" since June 1st of last year, and the samples so mentioned in this Report refer to samples taken before that date, whilst under the heading of "Tuberculin Tested" Milk are classed a certain number of samples which would have been previously labelled "Certified."

After January 1st, 1937, new methods of examination for cleanliness in production come into force for "Tuberculin Tested" and "Accredited" Milk, and these are very precisely laid down in the new Order.

The foregoing remarks apply to Raw Milk only. There are, however, two types of "Pasteurised Milk," namely, "Tuberculin Tested (Pasteurised)" and "Pasteurised."

There is no "Tuberculin Tested (Pasteurised)" Milk sold in the City and the only "Pasteurised" Milk sold in Portsmouth is that supplied to the Schools. The standard for cleanliness for this latter milk remains the same as under the old Order.

CERTIFIED MILK.

(Examined 13 ; Passed 13 ; Rejected 0.)

This Milk is produced by herds that contain no cows which re-act to the Tuberculin Test. The milk is bottled on the Farm where it is produced, and it must not contain at any time before delivery to the Consumer "more than 30,000 Bacteria per cubic centimetre, and 'Bacillus Coli' must be absent from one-tenth part of a cubic centimetre of the Milk."

The 13 samples examined contained an average of 4,960 Bacteria per cubic centimetre, and none of the samples failed to comply with the Bacillus Coli Test.

The average amount of Fat was 4.16 per cent., and of Solids-not-Fat 9.17 per cent.

The results show a very high standard of cleanliness and quality, and represent almost the ideal in milk production.

TUBERCULIN TESTED MILK.

(Examined 82 ; Passed 74 ; Rejected 8.)

This Milk is produced by cows which have been certified free from disease, and which are subjected to the Tuberculin Test at intervals of six months. It must not contain "more than 200,000 Bacteria per cubic centimetre, and Bacillus Coli must be absent from one-hundredth part of a cubic centimetre of the Milk." The milk must not be heated at any stage in its production. It is delivered to the Retailers in sealed churns and bottled locally.

The 82 samples examined gave an average of 11,800 Bacteria per cubic centimetre, and on 8 occasions the Milk failed to satisfy the conditions laid down for the Bacillus Coli test.

The average amount of Fat was 3.99 per cent., and of Solids-not-Fat 9.00 per cent.

ACCREDITED MILK.

(Examined 15 ; Passed 12 ; Rejected 3.)

Accredited Milk is produced from cows which are inspected by a Veterinary Surgeon at three-monthly intervals and the milk is to be treated in such a manner that a sample taken at any time between Production and Delivery to the Consumer, shall not contain "more than 200,000 Bacteria per cubic centimetre, and Bacillus Coli shall be absent from one-hundredth part of a cubic centimetre of the Milk."

The Milk shall not be treated by heat at any stage.

In other words, it is milk produced from apparently healthy cows under normally clean conditions, and it is delivered to the Retailer in sealed churns and bottled locally.

The 15 samples examined comprised 12 samples from one Producer, all of which were of the necessary standard of cleanliness. The remaining 3 samples from another Producer failed to comply with the Bacillus Coli Test. This Producer has now given up the sale of Accredited Milk.

The average amount of Fat in all of the samples was 3.80 per cent., and of Solids-not-Fat, 9.09 per cent.

PASTEURISED MILK.

(Examined 81 ; Passed 63 ; Rejected 9.)

Pasteurised Milk is milk which has been heated to a temperature of "not less than 145 degrees and not more than 150 degrees Fahrenheit," and retained at this temperature for at least half an hour, after which it is to be immediately cooled to a temperature of not more than 55 degrees Fahrenheit.

If a sample is taken after pasteurisation and before delivery to the Consumer, it shall not contain more than 100,000 Bacteria per cubic centimetre of the milk.

The 81 samples examined contained an average of 69,000 Bacteria per cubic centimetre, and on 9 occasions was the number of Bacteria above the limit of 100,000 per cubic centimetre.

On one occasion the milk was found to contain Added Water.

The average amount of Fat was 3.70 per cent., and of Solids-not-Fat 8.86 per cent.

These results are of interest inasmuch as they represent the quality of the milk as sold to the children under "The Milk in Schools Scheme" by which every child who desires it may have one-third of a pint daily.

These results suggest that the Pasteurised Milk supplied to the Schools is not entirely satisfactory, but it must, in fairness, be pointed out that they include the product of one Contractor who was supplying most unsatisfactory milk to the Schools and who, after repeated warnings, was finally removed from the list of Contractors.

Whilst on the subject of Pasteurised Milk attention should be called to the fact that, although many of the larger Dairies hold licences to sell "Pasteurised Milk" as defined by The Milk (Special Designations) Order, and advertise extensively that all their milk is pasteurised, yet they do not label and retail it as "Pasteurised Milk." Under these conditions no control is possible by the Local Authority.

Pasteurisation when carried out in the manner defined in The Milk (Special Designations) Order will destroy those microbes which are associated with disease, and for this purpose it is essential that the conditions for pasteurisation laid down in the Order are properly carried out.

ICE CREAM.

Report on the samples of Ice Cream examined during the year (1936).

There does not appear to be any appreciable variation in the composition of the Ice Cream sold in Portsmouth, and until some definite steps are taken by the Government to establish standards for this commodity, no improvement in quality can be expected.

A great reduction in the number of Bacteria present would be effected if there was compulsory pasteurisation of "The Mix," *i.e.* the final mixture of the ingredients before the Freezing Process.

There is no valid excuse for an uncountable number of Bacteria in a Frozen Custard Powder, as shown by sample No. 9, seeing that, if this product is properly made, it should be boiled before being frozen. Sample No. 8 which is a similar product bears out the truth of this statement.

The Dairies, who make Ice Cream as a by-product during the summer months, should always pasteurise their product before freezing in view of the fact that, at this time of the year, milk is liable to contain very large numbers of Bacteria and the freezing process merely retards or arrests their multiplication.

TABLE OF ANALYSES OF SAMPLES OF ICE-CREAM DURING 1936.

No.	Date	Total Solids	Fat	Mineral Matter	Bacteria on Agar at 37°C.	BACILLUS COLI TEST		Starch	Remarks
						Present in	Absent in		
1	15th Sept.	39.4	15.1	0.82	50,000	0.01 c.c.	0.001 c.c.	Absent	Made by Manufacturer
2	15th Sept.	34.0	9.8	0.92	60,000	0.01 c.c.	0.001 c.c.	Absent	Made by Manufacturer
3	22nd Sept.	31.0	10.3	0.78	50,000	0.001 c.c.	—	Absent	Made by Manufacturer
4	28th Sept.	38.8	13.1	0.68	1,800,000	0.01 c.c.	0.001 c.c.	Absent	Made by Manufacturer
5	15th Sept.	33.0	9.3	0.78	9,000	0.01 c.c.	0.001 c.c.	Absent	Made by Dairyman
6	22nd Sept.	25.5	2.7	0.98	630,000	0.001 c.c.	—	Absent	Made by Dairyman
7	28th Sept.	37.8	16.0	0.75	Uncountable	—	0.1 c.c.	Absent	Made by Dairyman
8	28th Sept.	35.0	11.4	0.5	1,000	0.01 c.c.	0.001 c.c.	Present	Made by Dairyman
9	22nd Sept.	25.5	3.4	0.98	Uncountable	0.1 c.c.	0.01 c.c.	Present	Boiled Custard

BUTTER.

Butter should contain no Fat other than that derived from Milk, not more than 16 per cent. of Water, and should not contain any preservative other than Salt.

The 111 samples of Butter examined during the year have all complied with these requirements.

The following table gives the number of samples of Butter analysed, the number adulterated, and the percentage of adulteration during the last five years :—

	Year	Samples Examined	Samples Adulterated	Percentage Adulterated
PORTSMOUTH	1932	108	0	—
do.	1933	112	0	—
do.	1934	111	3	2.7
do.	1935	110	0	—
do.	1936	111	0	—
ENGLAND AND WALES	1935	8,001	86	1.0

MARGARINE.

Fifty-one samples of Margarine were examined, all of which were passed as genuine.

All of the samples were correctly labelled as required by The Food and Drugs (Adulteration) Act, 1928.

GROCERIES.

No serious case of adulteration has been detected in this class of foodstuff.

It must however be mentioned that two samples of Pearl Barley were found to contain one per cent. of Mineral Matter, of the nature of Talc, which had been used to coat the grains of the Pearl Barley. This is an objectionable and unnecessary practice, inasmuch as Pearl Barley is largely used in the preparation of “Barley Water”—a beverage which is extensively used in cases of illness.

Both samples were obtained from the same Vendor, who was subsequently cautioned by the Medical Officer of Health.

Under this heading has also been included a sample of "Sild." "Sild" consists of a small fish, similar to sardines, and they are packed in Oil in tins.

The sample in question contained Metallic Tin to the extent of 3.5 grains to the pound of fish. This is an excessive amount when judged by the recommendations made in a Report to the Local Government Board in 1908 by Sir George Buchanan and Dr. Schryver, in which it is stated that, "it would appear that the presence of Tin in amounts greater than 2 grains to the pound must be regarded with suspicion as being liable to cause gastro-intestinal irritation."

The consignment, of which the sample was a part, was sent back to the Wholesalers in London.

One sample of Vinegar was found to contain only 3.6 per cent. of Acetic Acid whereas the standard usually adopted for Vinegar is 4 per cent. of Acetic Acid.

The Vendor was subsequently cautioned.

PRESERVATIVES.

The search for preservative substances in articles of food forms a large part of the work of the Department. Not only have those articles in which no preservative is permitted to be examined for these substances, but also foodstuffs in which preservatives are allowed have to be examined in order to ascertain if the preservative is present in excess of the quantities permitted in the Regulations.

One case of infringement of the Regulations was discovered. This was a sample of "Orange Wine," which was found to contain Benzoic Acid to the extent of 620 parts, whereas the Regulations only permit of 600 parts of Benzoic Acid per million parts of the sample.

Seeing that the infringement was so slight no action was taken in the matter, but further samples will be taken.

DRUGS.

Fifty-nine samples of Drugs were purchased from Pharmacists' shops in the City during the year and two samples of Camphorated Oil were found to be deficient in Camphor.

These samples were purchased from the same Pharmacist and consisted of a sample taken informally and a subsequent Official Sample taken a few days later.

The British Pharmacopoeia, 1932, states that Camphorated Oil shall contain 20 per cent. of Camphor whereas both of the above samples contained only 16.2 per cent. of Camphor. Both samples were, therefore, 19 per cent. deficient in Camphor.

Legal proceedings were taken, with successful results.

THE EXAMINATION OF ENAMELLED HOLLOW WARE FOR THE PRESENCE OF ANTIMONY.

In consequence of a Report published by the Ministry of Health concerning outbreaks of poisoning due to metallic Antimony from the use of enamelled Hollow-Ware, it was thought advisable to make an investigation into the nature of the Hollow-Ware sold in Portsmouth.

Enamelled Hollow-Ware comprises Mugs, Jugs, Cups, Basins, Buckets, etc., many of which find extensive use as Cooking Utensils. The presence of Antimony in enamel is due to the fact that, whereas Oxide of Tin is usually employed as a constituent of the glaze, its place has to some extent, been taken by Oxide of Antimony, which is much cheaper.

It appears that there have been three serious outbreaks of poisoning in different parts of the country in recent years due, in each case, to the consumption of Lemonade which had been prepared by dissolving "Lemonade Powder," consisting of Sugar, Tartaric Acid and a little Bicarbonate of Soda in water, the whole being made up in an enamelled bucket or jug.

The three outbreaks of poisoning referred to were at Newcastle-on-Tyne, where 60 persons were affected, at Folkestone, where 25 persons were involved, and at a London Hospital, where 65 out of 70 Nurses were violently ill. In each of these outbreaks the cause of the trouble was the same, namely, Lemonade prepared in bulk in an enamelled vessel.

The symptoms of Antimony poisoning closely resemble those of Arsenic, namely, a burning sensation in the Stomach, Colicky pains, Nausea, Vomiting and Collapse.

It would appear that in all of these outbreaks the Lemonade had been made up overnight and allowed to stand in the enamelled vessel in which it had been made—a very usual procedure when Lemonade is made for parties, picnics, etc.

In order to ascertain whether the various enamelled articles sold in Portsmouth contained soluble Antimony, the various utensils mentioned below were purchased by Inspector Sinnett, and a similar acid solution to Lemonade, or Fruit Juice, was made by dissolving 2 parts of Tartaric Acid in 100 parts of water. This solution was brought to boiling temperature and then placed in the enamelled vessel where it was allowed to stand for one hour in contact with the enamelled surface. At the end of this time the solution was removed from the vessel and the amount of Antimony, if any, determined.

Under these conditions the following results were obtained :

No.	Nature of Article	Country of Origin	Where Purchased	Antimony found Milligrammes per litre
1	Jug	Unmarked	Large Store	None
2	Porringer	English		None
3	Porringer	English		None
4	Pie Dish	Unmarked		None
5	Pie Dish	Unmarked		None
6	Small Jug	Foreign	Small Shop	3.4
7	Large Jug	Unmarked	Small Shop	None
8	Large Pan	Unmarked	Large Store	6.5
9	Tea Cup	Foreign	Multiple Shop	10.8
10	Jug	Foreign	Multiple Shop	4.3
11	Mug	Foreign	Multiple Shop	5.6
12	Mug	Czechoslovakia	Multiple Shop	None
13	Pie Dish	Unmarked	Multiple Shop	None
14	Pie Dish	Unmarked	Multiple Shop	None
15	Jug	Unmarked	Small Shop	None
16	Bucket	Foreign	Small Shop	14.1

A further test was made on Articles No. 8 and No. 16, in which a similar solution of Tartaric Acid was placed in these vessels and allowed to stand for twenty-four hours. The amount of Antimony in these solutions was then estimated and found to be 10.2 milligrammes per litre in the case of the large pan, and 23.9 milligrammes per litre in the case of the bucket.

The conclusion arrived at from this investigation is that there appears to be a certain amount of Hollow-Ware on sale in Portsmouth containing soluble Antimony the majority of which, as far as this investigation shows, appears to be of foreign manufacture.

Although the amount of Antimony found is not large, it does represent a potential source of danger, and since the various Institutions under the control of the Corporation use a considerable amount of enamelled ware it is suggested that a specification be drawn up for this class of goods with a view to obtaining such articles free from soluble Antimony.

POLICE AND CORONER.

On ten occasions the Department has been of material assistance to the City Police, involving the examination of 22 exhibits.

One of these cases is not without interest and may be mentioned here, in which a shop was broken into, a safe cut open and money extracted. In cutting open the safe, it was found that between the outer and inner walls there was a fireproof packing of Sawdust and Alum.

From an examination of the suspected thieves' clothing, and a cash-bag found on the premises of the accused, it was possible to prove the presence of identical material, namely, Alum and Sawdust, a fact which subsequently helped to obtain a conviction.

Five investigations were made for the City Coroner in cases of death, either by suspected poison or where the medical evidence as to the cause of death was insufficient without an analytical investigation.

In one case Strychnine was found, in another Aspirin, and in three cases no evidence of poison could be obtained from the examination of the viscera.

MISCELLANEOUS.

Fifty-four samples have been analysed under this heading, which includes samples submitted by The Medical Officer of Health, The City Engineer, and various other Departments of the Corporation.

Under this heading are also included samples submitted by Ratepayers in a private capacity and for the analysis of which a fee is paid.

The fees from this source have amounted to £20 4s. 0d., and this sum has been collected by the City Treasurer.

BACTERIOLOGICAL EXAMINATIONS :

DIPHTHERIA.

Diphtheritic Material has been received from the following sources :—

		<i>Negative</i>	<i>Positive</i>	<i>Total</i>
*Medical Practitioners	.....	1,509	88	1,597
School Clinic	.....	411	33	444
		<hr/>	<hr/>	<hr/>
Totals	.....	1,920	121	2,041
		<hr/>	<hr/>	<hr/>

(* Including Saint Mary's Hospital)

The Laboratory has been open on every Sunday throughout the year.

WATER, SEWAGE AND SEWAGE EFFLUENTS.

The monthly examination of the City Water Supply has shown that the high standard of purity has been well maintained.

This will be seen by the results of analysis shown on page 132 of this Report.

A weekly examination of the Sewage and Sewage Effluents from the Works at Cosham and Farlington has been carried out, comprising the analysis of 564 samples from these sources.

The results have shown that the three systems have worked satisfactorily and that a high grade Effluent has been uniformly produced.

TABLE OF ANALYSES OF PUBLIC WATER SUPPLY DURING 1936
BY THE PUBLIC ANALYST.
(Results expressed in parts per 100,000).

Date 1936	Source	Total Solid Residue	Volatile Solid Residue	Chlorine	Nitrogen as Nitrates	Total Hardness	Free or Saline Ammonia	Albu- minoid or Organic Ammonia	Oxygen absorbed in 4 hours at 37° C.	Remarks
Jan. 24	Co.'s Main, 16, Arundel Street	31.5	1.5	1.8	0.42	22.0	Traces	0.0015	Nil	Bacillus Coli absent from 50 c.c. Water
Feb. 26	do.	31.4	2.0	1.7	0.44	23.0	Traces	0.0015	Nil	do.
Mar. 20	do.	31.0	1.5	1.7	0.40	22.0	Traces	0.0015	Nil	do.
April 28	do.	31.5	1.5	1.8	0.30	21.0	Traces	0.0015	Nil	do.
May 28	do.	31.0	1.3	1.7	0.37	21.0	Traces	0.0012	Nil	do.
June 29	do.	31.0	1.0	1.8	0.39	21.0	Traces	0.0015	Nil	do.
July 22	do.	29.0	1.0	1.7	0.32	19.0	Traces	0.0012	Nil	do.
Aug. 19	do.	31.5	1.0	1.8	0.37	20.0	Traces	0.0015	Nil	do.
Sept. 24	do.	31.0	2.0	1.7	0.32	20.0	Traces	0.0015	Nil	do.
Oct. 21	do.	30.5	1.5	1.7	0.38	20.0	Traces	0.002	Nil	do.
Nov. 24	do.	31.0	1.0	1.7	0.38	20.0	Traces	0.0012	Nil	do.
Dec. 15	do.	30.5	1.0	1.7	0.40	20.0	Traces	0.0015	Nil	do.

INSPECTION OF MEAT & OTHER FOODS

SLAUGHTERHOUSES.—At the end of the year under review the number of private slaughterhouses in use was 58 (59), or one less than the previous year. Of this number 55 (56) were licensed slaughterhouses and 3 were registered slaughterhouses.

The number of visits paid by the Meat Inspector to slaughterhouses at all times during the year was 1,354 (1,443), equivalent to an average of about two visits per week to each slaughterhouse. It will be appreciated that this number is too small to permit of proper and adequate supervision, and though the meat traders assist the Department as much as they can by surrendering obviously diseased meat, there can be no doubt that meat inspection in the City is unsatisfactory.

Several complaints were received from householders and shopkeepers in close proximity to slaughterhouses regarding nuisances arising from smells, noise, etc.

SLAUGHTER OF ANIMALS ACT, 1933.—The number of slaughtermen registered during the year under the provisions of the above Act was 174 (172). Occasionally it has been necessary for the Meat Inspector to speak to slaughtermen about dirty knives, choppers and saws.

Report on Meat Inspection and Duties under the Contagious Diseases of Animals Acts.

By R. SCOULAR, *Meat Inspector*.

(M.R.C.V.S., Meat and Foods Cert., Royal San. Assoc. of Scotland).

LIVESTOCK INSPECTION AT THE PORT.—Throughout the year visits have been made, when possible, at the Port to inspect the animals landing from the Isle of Wight. No clinical evidence of any of the contagious and notifiable diseases was observed, and all animals were able to proceed to their destinations.

The following is a list of livestock brought into the City of Portsmouth during the year 1936 :—

By Boat from the Isle of Wight :

Cattle	.....	.....	.....	664
Sheep	.....	.....	.....	1,444
Swine	.....	.....	.....	4,738
Calves	.....	.....	.....	2,253
Horses	.....	.....	.....	169

At Cosham Market :

Poultry	.....	.....	.....	6,068
Rabbits	.....	.....	.....	102

At Fratton Railway Cattle Docks :

Cattle	.....	.....	.....	4,501
Sheep	.....	.....	.....	9,300
Calves	.....	.....	.....	423
Swine	.....	.....	.....	5,059

At Cosham Railway Cattle Docks :

Cattle	.....	.....	.....	266
Sheep	.....	.....	.....	57
Calves	.....	.....	.....	9
Horses	.....	.....	.....	1
Swine	.....	.....	.....	—

COSHAM MARKET. This market has been held weekly throughout the year, the only livestock exposed for sale being poultry. It has been visited at irregular intervals and found to be conducted in a satisfactory manner.

SWINE FEVER ORDER, 1908.—One outbreak of Swine Fever was confirmed by the Ministry of Agriculture at premises in close proximity to other piggeries. Fortunately, the disease was kept under control and stamped out and there was no other case in the City during the year.

SWINE FEVER ORDER, 1922.—3,039 licences were received relating to 34,640 Swine brought into the City.

TUBERCULOSIS ORDER, 1925.—The cowsheds in the City have been visited regularly and a satisfactory standard of cleanliness maintained. Clinical examination of the herds have been carried out and the cattle appeared healthy and in good condition.

TRANSIT OF ANIMALS (AMENDMENT) ORDER, 1931.—Supervision of the vehicles used for transporting animals has been kept up throughout the year with satisfactory results.

FOOT AND MOUTH DISEASE.—There has been no outbreak of this disease locally and there has been no restriction on the movement of livestock into the City.

SLAUGHTERHOUSES.—A continuous effort has been made throughout the year to keep these premises in a state as sanitary as is possible in the circumstances. In order to maintain the standard aimed at it has been necessary to administer a few cautions during the year. The provision made with regard to hygienic hanging accommodation for meat in the Slaughterhouses is very unsatisfactory. The contrast between this state of affairs and the equipment of up-to-date establishments is very striking.

MEAT REGULATIONS, 1924.—The position regarding adequate protection of meat during transit cannot be described as satisfactory. Too often during the year it has been necessary for me to warn youths, especially regarding the exposure of meat to contamination in the streets, which is a contravention of the Meat Regulations.

The following articles of food have been destroyed as unfit for the food of man, viz. :—

Beef.

Carcases of	....	....	72
Forequarters	....	....	21
Pieces of	....	lbs.	14,104
Ox Livers	....	....	117
„ Lungs	....	sets	124
„ Heads and Tongues	....	....	158
„ Hearts	....	....	87
„ Kidneys	....	....	6
„ „	....	lbs.	264

Mutton.

Carcases of	....	....	4
Pieces of	....	lbs.	247
Sheeps' Lungs	sets	....	7
„ Livers	....	....	4
„ „	lbs.	....	502
„ Hearts	....	....	5
„ „	lbs.	....	240
„ Kidneys	....	....	2
„ „	lbs.	....	184
„ „	pails	....	16

Veal.

Carcases of	....	....	1
Pieces of	....	lbs.	....1478
Calves' Livers	....	lbs.	.... 7

Pork.

Carcases of	....	....	32
Pieces of	....	lbs.	....699 $\frac{1}{2}$
Pigs' Lungs	....	sets	.... 63
„ Livers	....	....	.... 63
„ Heads	....	....	.... 93
„ Hearts	....	....	.... 57
„ Plucks	....	....	.... 10

Fish.

Bream	....	lbs.	.... 70
Brill	....	lbs.	.... 70
Cod	....	....	.... lbs. 829
„	....	....	.... boxes 10
Crayfish	....	box	.... 1
Dabs	....	lbs.	....1274
Dogfish	....	lbs.	.... 140
„	....	cases	.... 5
Fillets	....	lbs.	....2739
„	....	boxes	.... 3
Haddock	....	lbs.	....1586
„	....	boxes	.... 44
Hake	....	lbs.	.... 43
Herrings	....	lbs.	.... 414
„	....	boxes	.... 24
Kippers	....	lbs.	....1002
„	....	boxes	.... 4
Lemon Soles	....	lbs.	.... 873
Mackerel	....	lbs.	....3669
„	....	boxes	.... 4
Megrims	....	boxes	.... 5
„	....	lbs.	.... 164
Mullet	....	lbs.	.... 9
Plaice	....	lbs.	.... 169

Roes	....	lbs.	.... 84
„	....	boxes	.... 12
Skate	....	lbs.	.... 383
Soles	....	lbs.	....1187
Sprags	....	lbs.	.... 14
Sprats	....	lbs.	.... 238
Trout	....	lbs.	.... 48
Turbot	....	lbs.	.... 84
Whiting	....	lbs.	.... 364
„	....	boxes	.... 3
Witches	....	lbs.	.... 760
Capetails	....	lbs.	.... 229
Crabs	....	....	.... 64
„	....	lbs.	.... 304
„	....	kits	.... 6 $\frac{1}{2}$
„	....	barrels	.... 12 $\frac{1}{2}$
Cockles	....	bag	.... 1
Escallops	....	....	.... 27
Lobsters	....	lbs.	.... 19
Shrimps	....	pints	.... 18

Miscellaneous.

Bacon	....	lbs.	....314 $\frac{1}{2}$
Brawn	....	lbs.	.... 19
Chickens	....	....	.... 20
„	....	case	.... 1
Cheese	....	lbs.	.... 10
Ducks	....	....	.... 6
Eggs	....	....	.... 144
„	....	tin	.... 1
Ham	....	lbs.	.... 27
Partridge	....	....	.... 1
Pears	....	....	.... 135
Plums	....	boxes	.... 69
Poultry	....	lbs.	.... 220
Rabbits	....	....	.... 512
Sausages	....	lbs.	.... 27
Tinned Goods	....	....	....2130
Turkeys	....	....	.... 10

PUBLIC HEALTH ACT, 1875.—During the year some orange-tainted imported meat came into the City, which proved very troublesome to both wholesalers and retailers. A letter of protest was sent immediately to the proper quarter in London. There has been no recurrence of the trouble since and no doubt more care is now being exercised in the meat shipments to this country from the country of origin. Credit is due to both wholesalers and retailers for their readiness in surrendering this unmarketable meat to the Local Authority.

SAUSAGE MANUFACTORIES.—Strict supervision of these premises was maintained during the year and 152 visits were made.

IMPORTATION OF DOGS AND CATS ORDER, 1928.—22 notifications were received from the Customs Officers relating to 22 dogs and 1 cat.

PARROTS (PROHIBITION OF IMPORT) REGULATIONS, 1930.—During the year 33 birds have been dealt with under these Regulations.

HOUSING

HOUSING.

NEW HOUSES.—The total number of dwelling-houses or flats erected during the year was 994, as compared with 1,036 last year. Of this number 271 were erected by the City Council.

THE COUNCIL'S FIVE YEARS' HOUSING PROGRAMME.—Despite the fact that the Council's Five Years' Housing Programme was carried through with unabated vigour, there has been a slowing up of the programme owing to various unexpected difficulties. The Minister of Health, however, in anticipation of unavoidable delays encountered by Local Authorities throughout the country has extended the time, by which houses ranking for grant should be completed, from March, 1938 to December, 1938.

The following Schedule gives details of the displacement and rehousing arrangements in regard to each Area. The total number of houses dealt with, *i.e.* 350, is more than in any previous year in the history of the City.

When compared with the corresponding year of the Council's original Five Years' Housing Programme (*vide* Health Report for the year 1933), it will be seen that amendments have been made with the object of facilitating the rehousing of the maximum number of tenants in Portsea.

HOUSING ACT, 1936.

Programme for the Year 1936-37.

DISPLACEMENTS				REHOUSING		Remarks
Year ending March 31st	Scheme	Number of Houses dealt with	Number of Persons displaced or being displaced	Number of Dwellings erected or in course of erection	Scheme	
1936-7	Orange Street—Unicorn Street—Cumberland Street: No. 2	100	514			
1936-7	Orange Street—Unicorn Street—Cumberland Street: No. 2a	9	47	32	Orange Street—Unicorn Street—Cumberland Street, Con-tract No. 1	Flats
1936-7	Church Path North, etc.: No. 2	146	699	36	Orange Street—Unicorn Street—Cumberland Street, Con-tract No. 2	Flats
1936-7	Landport View	13	44			
1936-7	College Street	48	257	78	Orange Street—Unicorn Street—Cumberland Street, Con-tract No. 3	Flats
1936-7	Chance Street	20	39	95	Church Path North, etc., Con-tract No. 1	Flats
1936-7	Individual Unfit Houses	14	48			
	Totals for Year ending March 31st, 1937	350	1648	241		

CLEARANCES.

(a) REPRESENTATION OF UNHEALTHY AREAS.—During the year official representations were submitted by the Medical Officer of Health in respect of the following Areas :—

- (i) Unicorn Street, etc.—No. 2 Area ;
- (ii) Unicorn Street, etc.—No. 2A Area ;
- (iii) Church Path North, etc.—No. 2 Area ;
- (iv) Landport View Area ;
- (v) College Street Area ;
- (vi) Chance Street Area.

Compulsory Purchase Orders were made by the City Council in regard to (i), (ii) and (iii).

Clearance Orders or Compulsory Purchase Orders were made by the Health Committee in regard to (iv), (v) and (vi) and these Orders are awaiting confirmation by the City Council prior to their transmission to the Ministry of Health.

(b) PUBLIC INQUIRIES.—Public Inquiries were conducted by Ministry of Health Inspectors in regard to—

- (i) Union Street, etc.—No. 2 Area ;
- (ii) Union Street, etc.—No. 2A Area ;
- (iii) Church Path North, etc.—No. 2 Area.

The Minister of Health made Confirmation Orders in respect of three Areas without modification and the remaining three Areas are awaiting Confirmation Orders.

(c) INDIVIDUAL UNFIT HOUSES.—Demolition Orders were made by the City Council in regard to 7 dwellings represented by the Medical Officer of Health, as unfit for human habitation and incapable of being rendered so fit at a reasonable cost.

The number of houses demolished in pursuance of action taken under Section 19 of the Housing Act, 1930, was 8.

Representations were submitted by the Medical Officer of Health under Section 20 of the Housing Act, 1930, to the effect that 10 parts of bulidings were unfit for human habitation

and undertakings were given by the owner to execute the works necessary to render them so fit in 7 instances.

REHOUSING.—The Table on page 141 shows the number of houses in schemes in respect of which tenders for their erection were accepted by the City Council. In addition, the 28 dwellings in North Street and 100 at Wymering (shown as in course of erection in the corresponding table of the Health Report for the year 1935) are rapidly nearing completion.

It will be noted that with the development of the Scheme more and more families are being rehoused in Portsea each year.

HOUSE INSPECTION.—The following particulars are given in the form desired by the Ministry of Health :—

1.—INSPECTION OF DWELLING HOUSES DURING THE YEAR.

(1)	(a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	7914
	(b)	Number of inspections made for the purpose	....	23688
(2)	(a)	Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	....	175
	(b)	Number of inspections made for the purpose	....	525
(3)		Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	....	262
(4)		Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	....	47

2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	1272
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3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR.

A.—Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :

(1)		Number of dwelling houses in respect of which notices were served requiring repairs	....	40
(2)		Number of dwelling-houses which were rendered fit after service of formal notices :		
	(a)	By owners	....	20
	(b)	By local authority in default of owners	....	24

B.—Proceedings under Public Health Acts :

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	....	....	....	1453
(2) Number of dwelling houses in which defects were remedied after service of formal notices :				
(a) By owners	....	....	....	148
(b) By local authority in default of owners	....	....		—

C.—Proceedings under sections 19 and 21 of the Housing Act, 1930 :

(1) Number of dwelling houses in respect of which Demolition Orders were made	....	....	....	....	7
(2) Numbers of dwelling houses demolished in pursuance of Demolition Orders	....	....	....	....	8

D.—Proceedings under section 20 of the Housing Act, 1930 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	....	....	....	10
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	....	....		7

4. HOUSING ACT, 1935—OVERCROWDING.

(a) (i) Number of dwellings overcrowded at the end of the year	....	....	....	....	955
(ii) Number of families dwelling therein	....	....	....		955
(iii) Number of persons dwelling therein	....	....	....		5512
(b) Number of new cases of overcrowding reported during the year	....	....	....	....	Nil
(c) (i) Number of cases of overcrowding relieved during the year	....	....	....	....	37
(ii) Number of persons concerned in such cases	....	....			219
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding					—
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	....	....	....		—

ERADICATION OF BED BUGS.—During the year under review the number of Council houses in the Corporation Estates found to be infested with bed bugs was 92. These were disinfested by exposing the bug lairs as far as possible and then applying sulphur gas and/or Solution “D.”

The furniture and effects of 315 families about to be removed to Council houses under the Council's Five Years' Housing Programme, were dealt with as follows. The furniture was collected in special vans and taken to the Corporation Yard where the contents were subjected to a certain concentration of gas for a period of four hours; thereafter aeration took place, and when all traces of the gas had dispersed, the furniture was conveyed direct to the new dwelling. Upholstered articles *e.g.* bedding, mattresses, etc. were retained overnight to ensure that all the cyanide gas was removed. Chemical tests were carried out by way of confirmation. The tenants were given the loan of mattresses and bedding for use until their own bedding was returned the following day.

As a test of the efficiency of disinfestation, periodical inspections of Council houses were carried out during the year, and in no case was the presence of vermin detected which could be attributed to faulty disinfestation. In only two cases was vermin discovered, but on investigation infestation was proved to be due to the importation of infested articles of furniture into the new Council house several months after the removal.

In regard to private houses not connected with the Council's Five Years' Housing Programme, it is estimated that the number which were found to be infested was 231. Of these 143 were disinfested by the Corporation by means of sulphur and/or Solution "D." The remainder were dealt with by private Contractors.

OVERCROWDING.—Section 1 of the Housing Act of 1935 placed an obligation upon each Local Authority to cause an inspection to be made with a view to ascertaining what dwelling houses are overcrowded within the meaning of the Act and to prepare and submit to the Minister a report showing the result of the inspection and the number of new houses required, in order to abate overcrowding.

METHOD OF SURVEY.—The survey comprised all the working-class houses in the City, and the procedure adopted was outlined in detail in the Report of the Medical Officer of Health (Council Report Minute No. 2271, of 1935), the Survey being carried out by a temporary staff of specially selected workers during the period 5th December, 1935 to 28th March, 1936, and again from 10th August, 1936 to 12th December, 1936.

RESULTS OF SURVEY.—The following is a brief summary of the Medical Officer of Health's Report on the results of the Survey (*vide* Council Minute No. 1603, of 1936).

The total number of " dwellings " found to be overcrowded was 992, or 1.77% of the working-class dwellings in the City. This figure includes (a) 190 overcrowded " dwellings " out of a total of 1,956 properties on Corporation housing estates—a percentage of 9.7 ; and (b) 144 overcrowded " dwellings " out of a total of 1,455 " dwellings " in the Council's Five Years' Housing Programme, a percentage of 9.8.

The remainder of the City has 658 overcrowded " dwellings " out of a total of 52,526, a percentage of 1.25.

In regard to Wards, the greatest overcrowding exists in Portsea Ward, which has 5.84%, and St. Mary Ward, which has 3.51% overcrowding, as compared with 1.77% for the City as a whole.

The four-roomed house was the one found to be most overcrowded, followed next in order by the three-roomed, two-roomed and one-roomed house. Under the provisions of the Act, a " room " includes a living room as well as a bedroom.

Sex overcrowding exists in 27.9% of the 992 cases of overcrowding in the whole of the City.

PREVENTION OF FRESH OVERCROWDING.—The Minister of Health fixed 1st January, 1937 as the date from which fresh overcrowding will constitute an offence. Under Section 6 of the Act all rent books or similar documents relating to working-class houses must on that date contain a summary in a prescribed form of the provisions of the Act as to overcrowding which affect occupiers, together with a statement of the " permitted " number of persons for the house. Failure by the landlord to comply with this requirement will render him liable to a fine up to £10. Occupiers may be required to produce the rent books for inspection by the local authority ; if they fail to do so within seven days after request they will be liable to a fine of £2.

ABATEMENT OF EXISTING OVERCROWDING.—It was found that by a process of re-allocation of families, overcrowding could be abated in 79 of the 190 overcrowded dwellings in

the Council's Housing Estates. The Council, therefore, decided as a first step in the abatement of overcrowding to erect 111 houses or flats of the larger type, *i.e.* 4 six-roomed, 35 five-roomed, 70 four-roomed, 1 two-roomed and 1 one-roomed. This will leave a surplus of 111 houses of the smaller type (2 one-roomed, 30-three-roomed and 79 four-roomed) which can be utilised in connection with the abatement of overcrowding in the remainder of the City.

It is estimated that the erection of the above 111 houses together with the 144 houses for which provision has already been made in the Council's Five Years' Housing Programme, will abate 33% of the overcrowding of the whole City.

When these houses are completed it will be opportune to reconsider how far the accommodation provided has abated the overcrowding and to what extent the accommodation rendered vacant by the removal of overcrowded families has been utilised.

**HEALTH EDUCATION
AND PROPAGANDA**

HEALTH EDUCATION & PROPAGANDA.

“Improvements in the nation’s health speak for themselves. But we can still do more, because as yet we do not make full use of the services through which they have been effected.”—*The Right Hon. Sir Kingsley Wood, P.C., M.P., Minister of Health, on the occasion of his visit to Portsmouth to open the Health Week and Exhibition, 1936.*

It is useless to pass laws on health, no matter how wise and far-seeing, unless the people are able to understand and appreciate these laws and have the will to put them into effect. Further progress in the reduction of sickness and death will depend on the part played by the individual citizen in applying the knowledge which science has already furnished. The dissemination of this knowledge in an attractive and easily understood form is the aim of the Health Department, and during the year under review efforts were made to further public education in health.

HEALTH WEEK AND EXHIBITION.

A Health Week and Exhibition, organised in co-operation with the Central Council for Health Education, was opened by the Right Honourable Sir Kingsley Wood, P.C., M.P., Minister of Health, on September 14th. This was the first Health Week and Exhibition ever held in Portsmouth and was described by the Central Council for Health Education in their Annual Report “as being one of the most intensive Health Week Campaigns which have ever been carried out.”

The Connaught Drill Hall was utilised for the Exhibition and there was a most comprehensive array of exhibits dealing with health subjects on the 34 stands.

As a “curtain-raiser” to Health Week a poster competition was organised with the assistance of the Education Committee. This competition, for which all the school children of the City were eligible, took the form of composing original posters illustrating the values of fresh air, sunlight, exercise and rest, the importance of milk, fresh fruit and vegetables in a health diet, or a general health slogan. There was a large entry and the posters reached a very high standard of excellence.

The main features of the Week may be summarised as follows :—

(1) **Cinemas.**—Nearly 8,000 of the senior school children attended special showings of Health films at cinemas in the City and special health films were also included in some of the

ordinary programmes. The gymnasium at the Connaught Drill Hall was also fitted up as a cinema and members of the public visiting the Exhibition were able to see the latest health propaganda films. "House Full" notices were necessary at all these shows.

(2) **Lectures.**—Lectures given daily at the Exhibition by lecturers of national repute attracted large numbers of the public. In addition, open-air talks, supported by films shown from a cinemotor, were given at strategic points throughout the City to workers in large factories, etc., *e.g.* the Dockyard, and lecturers visited various Societies, Firms and Fellowships to give talks on health subjects. Fifty lectures were given throughout the week, and in all cases the response of the public was most gratifying.

(3) **Demonstrations.**—Cookery demonstrations were given daily at the Health Exhibition, both on the stalls and in the lecture hall. In addition, displays were given by the League of Health and Beauty and the Dancing to Health League, and daily demonstrations of First Aid by the British Red Cross Society.

(4) **Printed Publicity.**—This included the distribution of 10,000 bookmarks issued in books from the various Public Libraries, the display of 200 posters in prominent places, the distribution of 5,000 leaflets and booklets at the various meetings and lectures, the exhibition of 150 bills in tramcars and buses, the publication by the *Evening News* of an excellent 16-page Health Week Supplement with a circulation of 70,000, the circularising of some 150 Ministers of Religion with a request to insert in their Church Magazine a few notes prepared for the purpose, and to include the subject of "Health" in their sermons on Health Week Sunday.

The attendance at the Health Exhibition exceeded the most sanguine expectations, 26,630 persons visiting the Exhibition during the six days. Of these, 3,000 were school children, who were taken round in conducted parties and more than 50 per cent. of the remainder paid for admission.

No reference to Health Week would be complete without acknowledging with grateful thanks the co-operation of the Central Council for Health Education, the various Committees of the Corporation, the heads of the Departments and other bodies throughout the City, including the Cinematograph Exhibitors' Association, the *Evening News*, Ministers of Religion and many others, too numerous to mention here, who all helped to make the Week such a great success.

OTHER HEALTH PROPAGANDA.—In addition to the Health Week Campaign continuous educative work was carried out by the medical officers at the clinics and by the Health Visitors and Tuberculosis Nurses in the course of home visitation. The following thirty-two addresses on health were given by Medical Officers of the Health Department during 1936.

<i>Date</i>	<i>Subject</i>	<i>Lecturer</i>
5th January	Portsea Men's Conference—"How to Keep Fit and Well"	Dr. I. M. McLachlan
8th January	Portsmouth Branch, Pharmaceutical Society—"The Role of Bacteriology in Preventive Medicine, with special reference to Prophylaxis by Vaccines and Sera"	Dr. A. B. Williamson
8th January	Hants 12th V.A.D. Detachment—"The Role of Bacteriology in Preventive Medicine"	Dr. I. M. McLachlan
15th January	44th (St. Andrew's) Portsmouth Rover Crew—"Health"	Dr. A. B. Williamson
20th January	St. Boniface Men's Fellowship—"Public Health"	Dr. A. B. Williamson
3rd February	Christ Church Fellowship—"Health"	Dr. A. B. Williamson
6th February	St. Michael's Church, Ladies' Guild—"What you should know about the City's Health Services"	Dr. A. B. Williamson
3rd March	N.P.S.M.N. Association—"The Preventive Aspect of Public Health Work"	Dr. I. M. McLachlan
8th March	Southampton Brotherhood—"The Preventive Aspect of Medicine"	Dr. I. M. McLachlan
15th March	Lee Brotherhood—"The Health Services"	Dr. I. M. McLachlan
22nd March	Gosport Brotherhood—"The Health Services"	Dr. I. M. McLachlan
26th March	Dentists' Association—"The Role of Dentistry in Preventive Medicine"	Dr. A. B. Williamson
2nd April	National Society for Prevention of Cruelty to Children—"Child Welfare from the Public Health Aspect"	Dr. A. B. Williamson
16th April	Lake Road Baptists—"Health"	Dr. I. M. McLachlan
17th May	Cosham Brotherhood—"The City's Health Services"	Dr. I. M. McLachlan
21st May	Copnor Ratepayers' Association—"The Health Services of the City"	Dr. A. B. Williamson
24th May	Buckland Street Young People's Institute—"Prevention is better than Cure"	Dr. I. M. McLachlan
2nd June	Portsea Ratepayers' Association—"The Preventive Aspect of the Health Services of the City"	Dr. A. B. Williamson
8th July	Co-operative Women's Guild—"The City's Health Services"	Dr. I. M. McLachlan
24th September	Women's Meeting, Garfield Road—"Health and the Child"	Dr. T. E. Roberts
6th October	Women's Co-operative Guild, Cosham—"Child Welfare"	Dr. I. M. McLachlan
13th October	Powerscourt Methodist Men's Fellowship—"Infection"	Dr. J. Q. Mountain
20th October	Rotary Club—"Air Raid Precautions"	Dr. A. B. Williamson
25th October	Buckland Street Young People's Institute—"Religion and Healing"	Dr. I. M. McLachlan

<i>Date</i>	<i>Subject</i>	<i>Lecturer</i>
27th October	Cosham Congregational Women's Meeting— " Child Welfare "	Dr. T. E. Roberts
2nd November	Portsmouth Civic Survey Club—" Our Fight against Tuberculosis " (illustrated by lantern slides)	Dr. A. B. Williamson
23rd November	National Association of Funeral Directors— " Sanitation after Death "	Dr. I. M. McLachlan
26th November	Portsmouth and District Friendly Societies Council—" Infectious Diseases "	Dr. I. M. McLachlan
1st December	Central Conservative Association—" Health "	Dr. I. M. McLachlan
1st December	Portsmouth Brotherhood Debating and Literary Society—" Endocrinology "	Dr. J. Q. Mountain
6th December	Emsworth Brotherhood—" Prevention of Infectious Diseases "	Dr. I. M. McLachlan
7th December	Girls' Southern Secondary School—" Social Hygiene "	Dr. A. B. Williamson

Through the kindness of the Piers, Beach and Publicity Committee, a series of 12 posters, as under, illustrating an apt Health Slogan was exhibited in prominent places throughout the City on two of the former Empire Marketing Board frames.

" Diphtheria Immunisation "	<i>Issued by the Central Council for Health Education</i>
(January)	
" Venereal Diseases "	<i>Issued by the British Social Hygiene Council</i>
(February)	
" Health and Cleanliness "	<i>Issued by the Health and Cleanliness Council</i>
(March)	
" The Care of the Teeth "	<i>Issued by the Dental Board of the United Kingdom</i>
(April)	
" No Needless Noise "	<i>Issued by the Anti-Noise League</i>
(May)	
" Do you use the Health Services? "	<i>Issued by the Central Council for Health Education</i>
(June and September)	
" Eugenics "	<i>Issued by the Eugenics Society</i>
(July)	
" Venereal Diseases " (2nd Series)	<i>Issued by the British Social Hygiene Council</i>
(August)	
" Take Care of your Teeth "	<i>Issued by the Dental Board of the United Kingdom</i>
(October)	
" Maternity and Child Welfare "	<i>Issued by the National Council for Maternity and Child Welfare</i>
(November) (2nd Series)	
" Balance your Meal "	<i>Issued by the Central Council for Health Education</i>
(December)	

Advantage was taken of the distribution scheme of the Central Council for Health Education for the display of posters and leaflets pertaining to health subjects in the Child Welfare Centres and Tuberculosis Dispensary.

During Rat Week (first week in November) a special effort was made to bring home to occupiers their responsibility under the Rats and Mice (Destruction) Order, 1919, and the valuable services of the local Press were taken advantage of in making the subject more widely known. A rat film entitled " The Rat Menace " was shown during the week in a local cinema,

PORT SANITARY REPORT

Port Sanitary Authority.

To the Chairman and Members of the Port Sanitary Authority.

MADAM AND GENTLEMEN,

I have the honour to present my report on the work of the Port Sanitary Authority of Portsmouth during the year 1936.

The total number of foreign and coastwise ships entering the port each shows a slight increase as compared with the previous year.

No case of infectious disease was reported in the area during the year.

I desire to express my thanks to the King's Harbour Master and to H.M. Collector of Customs and staff for their cordial co-operation and valuable assistance during the year.

It is again my pleasure to record my appreciation of the excellent service readily and willingly given to me by the Port Sanitary Inspector.

To the Chairman and Members of the Portsmouth Port Sanitary Authority my thanks are due for their unfailing sympathy and support in all matters relating to port sanitation throughout the year.

Jurisdiction of the Port Sanitary Authority.

The limits of the jurisdiction of the Port Sanitary Authority are as follows :—

“ So much of the Port of Portsmouth as lies to the east of a line drawn due south from the most southerly point of the pier of the L. & S.W. Railway Co. at Stokes Bay to a point 50° 45' N. Lat. ; to the west of a line drawn due south to the same parallel of latitude from the south-eastern extremity of the common boundary of the Parishes of Havant and Warblington ; and to the north of a line drawn due west along the same parallel of latitude from the point at which the line lastly hereinbefore mentioned meets the said parallel to the point secondly hereinbefore mentioned ;

Together with the waters of the said Port of Portsmouth within such limits, and the place which may from time to time be appointed for the Customs Boarding Station for such part of the said Port, and the place which may from time to time be appointed for the mooring and anchoring of ships for such part of the said Port, under any Regulations for the prevention of the spread of diseases issued under the Authority of the Statutes in that behalf, and the place which may from time to time be appointed, with Our Consent, for the mooring or anchoring of any floating hospital provided by the said Sanitary Authority ; and, for the purpose of any such Regulations as aforesaid, shall also extend to any ship which, in pursuance thereof, or of any directions given thereunder, shall be moored or anchored at the place appointed thereunder as aforesaid, or which shall be on its way thither, together with the docks, quays, wharves, rivers, creeks, streams, channels, roads, bays, and harbours within the aforesaid limits.”

I. Amount of Shipping entering the Port during the Year.

TABLE A.

—		Number	Tonnage	Number inspected		Number reported to be Defective	Number of vessels on which defects were remedied	Number of vessels reported as having, or having had, during the voyage infectious disease on board
				By the Medical Officer of Health	By the Sanitary Inspector			
FOREIGN	Steamers	69	31,317	—	34	19	19	—
	*Motor	58	7,999	—	32	5	5	—
	Sailing	1	86	—	—	—	—	—
	Fishing	—	—	—	—	—	—	—
Total Foreign		128	39,402	—	66	24	24	Nil
COASTWISE	Steamers	570	250,969	—	58	11	11	—
	*Motor	187	25,191	—	57	2	2	—
	Sailing	1	120	—	—	—	—	—
	Fishing	—	—	—	—	—	—	—
Total Coastwise		758	276,280	—	115	13	13	Nil
Total Foreign and Coastwise		886	315,682	—	181	37	37	Nil

* Includes mechanically propelled vessels other than steamers.

II. Character of Trade of Port.

TABLE B.

There was no passenger traffic with foreign ports during the year.

Cargo Traffic. The principal imports were timber, cement, coal, stone and slates, chiefly from Frederikstad, Abo, Oslo, Antwerp, Calais, St. Malo, Roscoff, Jersey, Dunkirk, Archangel, Lovisa, Transung, Nearsnes, Guernsey, Wasa and Viborg.

III. Sources of Water Supply.

The water used in the docks is supplied by the Portsmouth Water Company. Vessels in dock are supplied from hydrants from the same source. There are two water boats in use, which are periodically inspected and maintained in a clean and hygienic condition.

With regard to the supply of drinking water to ships arriving at and leaving the port, the following precautions are taken before water is supplied :

When the water is turned on it is allowed to run through the hydrants for a while and then the hose is connected and the water allowed to run through the hose in the same way. When the quantity of water needed has been supplied, the hose is disconnected and the water allowed to run through the hose in the same way. When the quantity of water needed has been supplied the hose is disconnected and replaced in the store where it is locked up safely. The hydrants are locked and covered up also.

IV. Port Sanitary Regulations, 1933.

1. Arrangements for dealing with Declarations of Health.

Declarations of Health, which must be filled in and signed by the Master of every ship arriving from a foreign port are obtained—

- (a) in respect of vessels from non-infected ports, by the Customs Officer, who forwards them to the Port Medical Officer.
- (b) in respect of vessels from infected ports by the Port Medical Officer. Vessels are visited in dock by the Port Sanitary Inspector as soon as possible after docking.

2. Telegraphic Address.

To avoid delay in notifying inward vessels requiring special attention, the telegraphic address “ Portelth,” suggested by the Ministry of Health, has been adopted by the Port Sanitary Authority.

3. Mooring Stations.

Under Article 10 of the Port Sanitary Regulations, 1933, the following mooring stations have been established, with the concurrence of the King's Harbour Master and the Commissioners of Customs and Excise, viz.—

(a) OUTER MOORING STATION.

An area about half a mile north-west of Mother of Bank Spit.

(b) INNER MOORING STATION.

The upper reaches of Portsmouth Harbour.

This agreement is subject to the following understandings :—

- (1) That the mooring place referred to at (a) above is for ships with cholera, plague, yellow fever, typhus fever or smallpox on board, and that at (b) for all other unhealthy ships not within a standing exemption.

(2) That a standing exemption from detention under Article 14 has been granted by the Medical Officer of the Port Sanitary Authority in respect of any ship which—

- (i) has called at a Port or seaboard included in the weekly return of infected or suspected ports or seabords, but reports “all well” during the voyage or arrives with no sickness on board, unless a written notice to the contrary has been delivered to the Customs Officer by or on behalf of the Medical Officer of the Port Sanitary Authority.
- (ii) has on board a case of minor infectious disorder, namely, chickenpox, measles, scarlet fever, diphtheria, enteric fever, erysipelas, malaria, dysentery, pneumonia, tuberculosis, mumps or cerebro-spinal fever.

(3) That when necessary the Port Sanitary Authority will convey the Customs Officers to the mooring place referred to as (a) above, free of expense to the Crown.

4. Arrangements for dealing with cases of Infectious Diseases, etc.

Cases of dangerous infectious disease are removed to the smallpox hospital at Elson.

All other cases of infectious disease are removed to the City Infectious Diseases Hospital by means of the Corporation Motor Ambulance Service.

Contacts of Infectious Diseases Cases.

- (a) LIVING IN THE CITY. If not removed to hospital they are kept under observation by the Sanitary Inspector.
- (b) PROCEEDING TO AN ADDRESS OUTSIDE THE CITY. The Medical Officer of Health of the place of destination is advised.

A consulting room and waiting room are available at the docks for medical examination.

Personnel and clothing are disinfected at the Infectious Diseases Hospital. Provision can be made for the temporary accommodation of persons who may have to be detained pending further examination.

Bacteriological and pathological examination of rats is carried out by the Pathologist of the Royal Portsmouth Hospital.

Arrangements are made at the Venereal Diseases Clinic, the Royal Portsmouth Hospital, for the diagnosis and treatment of venereal diseases among sailors.

TABLE C.

No cases of Infectious Disease was landed from Vessels.

TABLE D.

There were no cases of infectious disease occurring upon the voyage but disposed of prior to the vessel's arrival.

V. Measures against Rodents.

All vessels arriving from abroad are examined periodically by the Port Sanitary Inspector and specimen rats are taken for examination for rat plague.

When necessary, rat guards are placed on ropes between the ships and the quays. A trained rat-catcher is employed periodically.

TABLES E. and F.

No rats were destroyed during the year on vessels or in the docks.

VI. Hygiene of Crews' Spaces.

TABLE J.
CLASSIFICATION OF NUISANCES.

Nationality of Vessel	No. inspected during the Year	Defects of original construction	Structural defects through wear and tear	Dirt, vermin and other conditions prejudicial to health
British	115	Nil	Nil	15
Other Nations	66	Nil	Nil	21

VII. Food Inspections.

The importations of food-stuffs are small in amount, these being chiefly potatoes from the Channel Islands, Scotland and Ireland, and flour, sugar and tinned foods from Liverpool, London, etc. During the year no adverse reports were made by the Meat Inspector.

The number of livestock landed at the docks from the Isle of Wight was 9,268. During the inspections of livestock no clinical evidence of the existence of any of the contagious and notifiable animal diseases was found.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,

Port Medical Officer of Health.